

Food Establishment Inspection Form				Page 1 of 2	
The Commonwealth of Massachusetts City of Salem Board of Health 120 Washington Street, Salem MA 01970 (978) 741-1800		# Violations <u>2</u> Priority- <u>0</u> Priority foundation- <u>0</u> Core- <u>2</u> Score (optional) _____		Date <u>12/5/2018</u> Time In <u>9:40 am</u> Time Out <u>10:44 am</u>	
		Establishment Name <u>Bates Elementary School</u> Establishment Address <u>53 Liberty Avenue</u> Telephone <u>(978) 825-3419</u> Owner <u>Salem Public School</u> Person-in-Charge (PIC) <u>Patricia Mento</u> Inspector <u>Janice Orta</u>		Risk Category _____ Type of Operation(s) <input checked="" type="checkbox"/> Food Service <input type="checkbox"/> Retail <input type="checkbox"/> Residential Kitchen <input type="checkbox"/> Mobile <input type="checkbox"/> Temporary <input type="checkbox"/> Caterer <input type="checkbox"/> Bed & Breakfast <input type="checkbox"/> Farmer's Market <input type="checkbox"/> Other: _____	
FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS Circle designated compliance status (IN, OUT, N/O, N/A) for each numbered item IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable Mark "X" in appropriate box for COS and/or R COS = corrected on-site during inspection R = repeat violation					
Compliance Status		COS	R	Compliance Status	
Supervision				Time / Temperature Control for Safety	
1	IN OUT			17	IN OUT
2	IN OUT N/A			18	IN OUT N/A N/O
Employee Health				19	IN OUT N/A N/O
3	IN OUT			20	IN OUT N/A N/O
4	IN OUT			21	IN OUT N/A N/O
6	IN OUT			22	IN OUT N/A N/O
Good Hygienic Practices				23	IN OUT N/A N/O
6	IN OUT N/O			24	IN OUT N/A N/O
7	IN OUT			Consumer Advisory	
Preventing Contamination by Hands				25	IN OUT N/A
8	IN OUT N/O			Requirements for Highly Susceptible Populations (HSP)	
9	IN OUT N/A N/O			26	IN OUT N/A
10	IN OUT			Food / Color Additives and Toxic Substances	
11	IN OUT			27	IN OUT N/A
12	IN OUT N/A N/O			28	IN OUT N/A
13	IN OUT			Conformance with Approved Procedures	
14	IN OUT N/A N/O			29	IN OUT N/A
Protection from Contamination				Risk Factors are important practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public health interventions are control measures to prevent foodborne illness or injury.	
15	IN OUT N/A N/O				
16	IN OUT N/A				
GOOD RETAIL PRACTICES					
Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods. Mark "X" in box if numbered item is not in compliance Mark "X" in appropriate box for COS and/or R COS = corrected on-site during inspection R = repeat violation					
Compliance Status		COS	R	Compliance Status	
Safe Food and Water				Proper Use of Utensils	
30	Pasteurized eggs used where required			43	In-use utensils properly stored
31	Water & ice from approved source			44	Utensils, equipment & linens: properly stored, dried, & handled
32	Variance obtained for specialized processing methods			45	Single-use / single-service articles: properly stored & used
Food Temperature Control				46	Gloves used properly
33	Proper cooling methods used; adequate equipment for temperature control			Utensils, Equipment and Vending	
34	Plant food properly cooked for hot holding			47	Food & non-food contact surfaces cleanable, properly designed, constructed & used
35	Approved thawing methods used			48	Warewashing facilities: installed, maintained, & used; test strips
36	Thermometers provided & accurate			49	Non-food contact surfaces clean
Food Identification				Physical Facilities	
37	Food properly labeled; original container			50	Hot & cold water available; adequate pressure
Prevention of Food Contamination				51	Plumbing installed; proper backflow devices
38	Insects, rodents, & animals not present			52	Sewage & waste water properly disposed
39	Contamination prevented during food preparation, storage and display			53	Toilet features: properly constructed, supplied, & cleaned
40	Personal cleanliness			54	Garbage & refuse properly disposed; facilities maintained
41	Wiping cloths: properly used & stored			55	Physical facilities installed, maintained, & clean
42	Washing fruits & vegetables			56	Adequate ventilation & lighting; designated areas used
SPECIAL REQUIREMENTS / OTHER <input type="checkbox"/> Anti-choking (590.009(E)) <input type="checkbox"/> Tobacco (590.009(F)) <input type="checkbox"/> Allergen Awareness (590.009(G)) <input type="checkbox"/> Local law regulation <input type="checkbox"/> Other					
Official Order for Correction: Based on an inspection today, the items checked indicate violations of the Board of Health Food Regulation / 2013 Federal Food Code. This report, when signed below by a Board of Health member or its agent constitutes an order of the Board of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have a right to a hearing. Your request must be in writing and submitted to the Board of Health at the above address within ten (10) calendar days of receipt of this order.					
PIC's Signature: <u>Patricia Mento</u> Inspector's Signature: <u>Janice Orta</u>		Print: <u>Patricia Mento</u> Follow-up: YES NO (circle one)		Date: <u>12-5-18</u> <u>Routine</u>	

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Establishment Name:

Establishment Name: Bates Elementary School

Date: 12/10/18

Violations cited in this report must be corrected within the time frames or as stated in Section 8-405.11 of the Food Code

PIC's Signature:

- Peter Meitner

Date: 12-5-68

Inspector's Signature

Signature: James Potter

Date: 12/5/18

Food Establishment Inspection Form

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The Commonwealth of Massachusetts
City of Salem Board of Health
120 Washington Street, Salem MA 01970
(978) 741-1800

Violations 3
Priority- I Priority foundation- 0 Core- 2
Score (optional)

Date 5/06/2021
Time In 9:10am
Time Out 10:50am

Establishment Name Bates Elementary School
Establishment Address 33 Liberty Hill Avenue

Risk Category

Type of Operation(s)

- ☒ Food Service
☐ Retail
☐ Residential Kitchen
☐ Mobile
☐ Temporary
☐ Caterer
☐ Bed & Breakfast
☐ Farmer's Market
☐ Other:

Type of Inspection

- ☒ Routine
☐ Reinspection
Previous Inspection Date:
☐ Pre-Operation
☐ Suspect Illness
☐ General Complaint
☐ HACCP
☐ Other:

Telephone 978-825-3419 HACCP Y/N

Owner Salem Public Schools Permit #:

Person-in-Charge (PIC) Patty Mento Food Safety Training / Exp. Date 9/18/2021

Inspector Jeffrey Brouse

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Circle designated compliance status (IN, OUT, N/A) for each numbered item
IN = in compliance OUT = not in compliance N/A = not observed N/A = not applicable

Mark "X" in appropriate box for COS and/or R
COS = corrected on-site during inspection R = repeat violation

Compliance Status COS R

Compliance Status COS R

Supervision

- 1 ☒ IN ☐ OUT PIC present, demonstrates knowledge, and performs duties
2 ☒ IN ☐ OUT ☐ N/A Certified Food Protection Manager

Employee Health

- 3 ☒ IN ☐ OUT Management, food employee and conditional employee; knowledge, responsibilities and reporting
4 ☒ IN ☐ OUT Proper use of restriction and exclusion
5 ☒ IN ☐ OUT Procedures for responding to vomiting and diarrheal events

Good Hygienic Practices

- 6 ☒ IN ☐ OUT ☒ N/A Proper eating, testing, drinking, or tobacco use
7 ☒ IN ☐ OUT ☐ N/A No discharge from eyes, nose, and mouth

Preventing Contamination by Hands

- 8 ☒ IN ☐ OUT ☐ N/A Hands clean & properly washed
9 ☒ IN ☐ OUT ☐ N/A No bare hand contact with RTE food
10 ☒ IN ☐ OUT Adequate handwashing sinks properly supplied and accessible

Approved Source

- 11 ☒ IN ☐ OUT Food obtained from approved source
12 ☒ IN ☐ OUT ☐ N/A Food received at proper temperature
13 ☒ IN ☐ OUT Food received in good condition, safe, & unadulterated
14 ☒ IN ☐ OUT ☐ N/A Required records available: shellstock tags, parasite destruction

Protection from Contamination

- 15 ☒ IN ☐ OUT ☐ N/A Food separated and protected
16 ☒ IN ☐ OUT ☐ N/A Food-contact surfaces; cleaned & sanitized

Time / Temperature Control for Safety

- 17 ☒ IN ☐ OUT Proper disposition of returned, previously served, reconditioned & unsafe food
18 ☒ IN ☐ OUT ☐ N/A Proper cooking time & temperatures
19 ☒ IN ☐ OUT ☐ N/A Proper reheating procedures for hot holding
20 ☒ IN ☐ OUT ☐ N/A Proper cooling time and temperature
21 ☒ IN ☐ OUT ☐ N/A Proper hot holding temperature
22 ☒ IN ☐ OUT ☐ N/A Proper cold holding temperature
23 ☒ IN ☐ OUT ☐ N/A Proper date marking and disposition
24 ☒ IN ☐ OUT ☐ N/A Time as a Public Health Control

Consumer Advisory

- 25 ☒ IN ☐ OUT ☐ N/A Consumer advisory provided for raw / undercooked food

Requirements for Highly Susceptible Populations (HSP)

- 26 ☒ IN ☐ OUT ☐ N/A Pasteurized foods used; prohibited foods not offered

Food / Color Additives and Toxic Substances

- 27 ☒ IN ☐ OUT ☐ N/A Food additives: approved & properly used
28 ☒ IN ☐ OUT ☐ N/A Toxic sub. properly identified, stored & used

Conformance with Approved Procedures

- 29 ☒ IN ☐ OUT ☐ N/A Compliance with variance / specialized process / HACCP Plan

Risk Factors are important practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public health interventions are control measures to prevent foodborne illness or injury.

GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

Mark "X" in box if numbered item is not in compliance

Mark "X" in appropriate box for COS and/or R

COS = corrected on-site during inspection

R = repeat violation

Compliance Status COS R

Compliance Status COS R

Safe Food and Water

- 30 Pasteurized eggs used where required
31 Water & ice from approved source
32 Variance obtained for specialized processing methods

Food Temperature Control

- 33 Proper cooling methods used; adequate equipment for temperature control
34 Plant food properly cooked for hot holding
35 Approved thawing methods used
36 Thermometers provided & accurate

Food Identification

- 37 Food properly labeled; original container

Prevention of Food Contamination

- 38 Insects, rodents, & animals not present
39 Contamination prevented during food preparation, storage and display
40 Personal cleanliness
41 Wiping cloths: properly used & stored
42 Washing fruits & vegetables

Proper Use of Utensils

- 43 In-use utensils properly stored
44 Utensils, equipment & linens: properly stored, dried, & handled
45 Single-use / single-service articles: properly stored & used
46 Gloves used properly

Utensils, Equipment and Vending

- 47 Food & non-food contact surfaces cleanable, properly designed, constructed & used
48 Warewashing facilities: installed, maintained, & used; test strips
49 Non-food contact surfaces clean

Physical Facilities

- 50 Hot & cold water available; adequate pressure
51 Plumbing installed; proper backflow devices
52 Sewage & waste water properly disposed
53 Toilet facilities: properly constructed, supplied, & cleaned
54 Garbage & refuse properly disposed; facilities maintained
55 Physical facilities installed, maintained, & clean
56 Adequate ventilation & lighting; designated areas used

57 SPECIAL REQUIREMENTS / OTHER ☐ Anti-choking (590.009(E)) ☐ Tobacco (590.009(F)) ☐ Allergen Awareness (590.009(G)) ☐ Local law regulation ☐ Other

Official Order for Correction: Based on an inspection today, the items checked indicate violations of the Board of Health Food Regulation / 2013 Federal Food Code. This report, when signed below by a Board of Health member or its agent constitutes an order of the Board of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If approved by this order, you have a right to a hearing. Your request must be in writing and submitted to the Board of Health at the above address within ten (10) calendar days of receipt of this order.

PIC's Signature: Patty Mento
Inspector's Signature: Jeffrey Brouse

Print: Patty Mento
Follow-up: YES (circle one) Follow-up Date, if applicable: Next Routine

Date: 5-6-21

Food Establishment Inspection Form

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The Commonwealth of Massachusetts
City of Salem Board of Health
120 Washington Street, Salem MA 01970
(978) 741-1800

Violations 17
Priority- 2 Priority foundation- 1 Core- 9
Score (optional)

Date 10/04/2018
Time In 9:40am
Time Out 11:25am

Establishment Name Bently Academy Charter School
Establishment Address 25 Memorial Drive

Risk Category

Type of Operation(s)

Type of Inspection

Telephone
Owner Salem Public Schools
Person-In-Charge (PIC) Lori Gerome
Inspector Jeffrey Barosy

HACCP Y/N
Permit #
Food Safety Training / Expi. Date Not Present

☒ Food Service
☐ Retail
☐ Residential Kitchen
☐ Mobile
☐ Temporary
☐ Caterer
☐ Bed & Breakfast
☐ Farmer's Market
☐ Other:

☒ Routine
☐ Reinspection
Previous Inspection Date:
☐ Pre-Operation
☐ Suspect Illness
☐ General Complaint
☐ HACCP
☐ Other:

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance Status		COS	R	Compliance Status		COS	R
Supervision				Time / Temperature Control for Safety			
1	IN OUT			17	IN OUT		
PIC present, demonstrates knowledge, and performs duties				Proper disposition of returned, previously served, reconditioned & unsafe food			
2	IN OUT N/A			18	IN OUT N/A N/O		
Certified Food Protection Manager				Proper cooking time & temperatures			
Employee Health				19	IN OUT N/A N/O		
3	IN OUT			Proper reheating procedures for hot holding			
Management, food employee and conditional employee; knowledge, responsibilities and reporting				20	IN OUT N/A N/O		
4	IN OUT			Proper cooling time and temperature			
Proper use of restriction and exclusion				21	IN OUT N/A N/O		
5	IN OUT			Proper hot holding temperature			
Procedures for responding to vomiting and diarrheal events				22	IN OUT N/A N/O		
Good Hygienic Practices				23	IN OUT N/A N/O		
6	IN OUT N/O			Proper cold holding temperature			
Proper eating, tasting, drinking, or tobacco use				24	IN OUT N/A N/O		
7	IN OUT N/O			Proper date marking and disposition			
No discharge from eyes, nose, and mouth				Consumer Advisory			
Preventing Contamination by Hands				25	IN OUT N/A		
8	IN OUT N/O			Consumer advisory provided for raw / undercooked food			
Hands clean & properly washed				Requirements for Highly Susceptible Populations (HSP)			
9	IN OUT N/A N/O			26	IN OUT N/A		
No bare hand contact with RTE food				Pastorized foods used; prohibited foods not offered			
10	IN OUT			Food / Color Additives and Toxic Substances			
Adequate handwashing sinks properly supplied and accessible				27	IN OUT N/A		
Approved Source				28	IN OUT N/A		
11	IN OUT			Food additives: approved & properly used			
Food obtained from approved source				Conformance with Approved Procedures			
12	IN OUT N/A N/O			29	IN OUT N/A		
Food received at proper temperature				Compliance with variance / specialized process / HACCP Plan			
13	IN OUT			Risk Factors are important practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public health interventions are control measures to prevent foodborne illness or injury.			
Food received in good condition, safe, & undeteriorated							
14	IN OUT N/A N/O						
Required records available: shellstock tags, parasite destruction							
Protection from Contamination							
15	IN OUT N/A N/O						
Food expensed and protected							
16	IN OUT N/A						
Food-contact surfaces; cleaned & sanitized							

GOOD RETAIL PRACTICES

Compliance Status		COS	R	Compliance Status		COS	R
Safe Food and Water				Proper Use of Utensils			
30	Pasteurized eggs used where required			43	In-use utensils properly stored		
31	Water & ice from approved source			44	Utensils, equipment & linens: properly stored, dried, & handled		
32	Variance obtained for specialized processing methods			45	Single-use / single-service articles: properly stored & used		
Food Temperature Control				46	Gloves used properly		
33	Proper cooling methods used; adequate equipment for temperature control			Utensils, Equipment and Vending			
34	Plant food properly cooked for hot holding			47	Food & non-food contact surfaces cleanable, properly designed, constructed & used		
35	Approved thawing methods used			48	Warewashing facilities: installed, maintained, & used; test strips		
36	Thermometers provided & accurate			49	Non-food contact surfaces clean		
Food Identification				Physical Facilities			
37	Food properly labeled; original container			50	Hot & cold water available; adequate pressure		
Prevention of Food Contamination				51	Plumbing installed; proper backflow devices		
38	Insects, rodents, & animals not present			52	Sewage & waste water properly disposed		
39	Contamination prevented during food preparation, storage and display			53	Toilet features: properly constructed, supplied, & cleaned		
40	Personal cleanliness			54	Garbage & refuse properly disposed; facilities maintained		
41	Wiping cloths: properly used & stored			55	Physical facilities installed, maintained, & clean		
42	Washing fruits & vegetables			56	Adequate ventilation & lighting; designated areas used		

57 SPECIAL REQUIREMENTS / OTHER ☐ Anti-choking (590.009(E)) ☐ Tobacco (590.009(F)) ☐ Allergen Awareness (590.009(G)) ☐ Local law regulation ☐ Other

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PIC's Signature: *Lori Gerome* Print: LORI GEROME Date: 10/4/18
Inspector's Signature: *Jeffrey Barosy* Follow-up: YES NO (circle one) Follow-up Date, if applicable: Next Routine

Food Establishment Inspection Form

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The Commonwealth of Massachusetts
City of Salem Board of Health
120 Washington Street, Salem MA 01970
(978) 741-1800

Establishment Name:

Bentley Academy Charter School

Date: 10/04/2018

TEMPERATURE OBSERVATIONS

Item / Location	Temp (°F)	Item / Location	Temp (°F)	Item / Location	Temp (°F)

OBSERVATIONS AND/OR CORRECTIVE ACTIONS

Violations cited in this report must be corrected within the time frames or as stated in Section 8-405.11 of the Food Code

Item Number	Code Section	P = Priority Item PF = Priority Foundation Item	Description of Violation
55	6-501.11		- Ceiling tile above refrigerator dishwashing machine is missing, exposing an air vent with accumulating dust. Replace ceiling tile.
49	4-602.13		- Dust found accumulating on ceiling of walk-in refrigerator. Remove dust in a manner that does not compromise food items.
10	6-301.12	PF	- Handwashing sinks in bathroom and across from walk-in freezer lack paper towels. Provide paper towels for these sinks.
2	2-102.12(A)		- Current Serv Safe and Allergen Awareness certificates are not posted. Have them posted in kitchen.
57	590.009(G)	P	
54	Section 5-5		- Dumpster lids found open. Keep dumpster lids closed when not in use.
17	3-701.11	P	- Dented can found in dry storage area. Discard all damaged cans. (Collected on site)

Discussion with PIC:

Corrective Action Required

☐ No

☒ Yes

☐ Voluntary Compliance

☐ Employee Restriction / Exclusion

☐ Re-inspection Scheduled

☐ Emergency Suspension

☐ Embargo

☐ Emergency Closure

☐ Voluntary Disposal

☐ Other

PIC's Signature:

Date:

Inspector's Signature

Date:

Food Establishment Inspection Form

Page 1 of 3

The Commonwealth of Massachusetts
City of Salem Board of Health
120 Washington Street, Salem MA 01970
(978) 741-1800

Violations 7
Priority- 0 Priority foundation- 1 Core- 6
Score (optional)

Date 5/11/2019
Time In 9:30am
Time Out 11:15am

Establishment Name Bentley Academy Charter School

Risk Category

Type of Operation(s)

Type of Inspection

Establishment Address 25 Memorial Drive

Telephone 978-740-1162

HACCP Y/N

☒ Food Service

☒ Routine

Owner Salem Public Schools

Permit #:

☐ Retail

☐ Reinspection

Person-In-Charge (PIC) Lori Gerome

Food Safety Training / Exp. Date 6/13/2020

☐ Residential Kitchen

Previous Inspection Date:

Inspector Jeffrey Buroy

☐ Mobile

☐ Pre-Operation

☐ Temporary

☐ Suspect Illness

☐ Caterer

☐ General Complaint

☐ Bed & Breakfast

☐ HACCP

☐ Farmer's Market

☐ Other:

☐ Other:

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Circle designated compliance status (IN, OUT, N/O, N/A) for each numbered item
IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Mark "X" in appropriate box for COS and/or R
COS = corrected on-site during inspection R = repeat violation

Compliance Status COS R

Compliance Status COS R

Supervision

1 ☒ OUT PIC present, demonstrates knowledge, and performs duties
2 ☒ OUT N/A Certified Food Protection Manager

17 ☒ OUT Proper disposition of returned, previously served, reconditioned & unsafe food

Time / Temperature Control for Safety

3 ☒ IN/OUT Management, food employee and conditional employee; knowledge, responsibilities and reporting
4 ☒ IN/OUT Proper use of restriction and exclusion
5 ☒ IN/OUT Procedures for responding to vomiting and diarrheal events

18 ☒ IN/OUT N/A N/O Proper cooking time & temperatures

19 ☒ IN/OUT N/A N/O Proper reheating procedures for hot holding

20 ☒ IN/OUT N/A N/O Proper cooling time and temperature

21 ☒ IN/OUT N/A N/O Proper hot holding temperature

22 ☒ IN/OUT N/A N/O Proper cold holding temperature

23 ☒ IN/OUT N/A N/O Proper date marking and disposition

24 ☒ IN/OUT N/A N/O Time as a Public Health Control

Good Hygienic Practices

6 ☒ IN/OUT N/O Proper eating, tasting, drinking, or tobacco use
7 ☒ IN/OUT N/O No discharge from eyes, nose, and mouth

Consumer Advisory

25 ☒ IN/OUT N/A Consumer advisory provided for raw / undercooked food

Preventing Contamination by Hands

8 ☒ IN/OUT N/O Hands clean & properly washed
9 ☒ IN/OUT N/A N/O No bare hand contact with RTE food
10 ☒ IN/OUT Adequate handwashing sinks properly supplied and accessible

Requirements for Highly Susceptible Populations (HSP)

26 ☒ IN/OUT N/A Pasteurized foods used; prohibited foods not offered

Approved Source

11 ☒ IN/OUT Food obtained from approved source
12 ☒ IN/OUT N/A N/O Food received at proper temperature
13 ☒ IN/OUT Food received in good condition, safe, & unadulterated
14 ☒ IN/OUT N/A N/O Required records available: shellstock tags, parasite destruction

Food / Color Additives and Toxic Substances

27 ☒ IN/OUT N/A Food additives: approved & properly used

28 ☒ IN/OUT N/A Toxic sub. properly identified, stored & used

Conformance with Approved Procedures

29 ☒ IN/OUT N/A Compliance with variance / specialized process / HACCP Plan

Protection from Contamination

15 ☒ IN/OUT N/A N/O Food separated and protected
16 ☒ IN/OUT N/A Food-contact surfaces; cleaned & sanitized

Risk Factors are important practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public health interventions are control measures to prevent foodborne illness or injury.

GOOD RETAIL PRACTICES

Good Retail Practices are preventive measures to control the addition of pathogens, chemicals, and physical objects into foods.

Mark "X" in box if numbered item is not in compliance

Mark "X" in appropriate box for COS and/or R

COS = corrected on-site during inspection

R = repeat violation

Compliance Status COS R

Compliance Status COS R

Safe Food and Water

30 Pasteurized eggs used where required
31 Water & ice from approved source
32 Variance obtained for specialized processing methods

Proper Use of Utensils

43 In-use utensils properly stored
44 Utensils, equipment & linens: properly stored, dried, & handled
45 Single-use / single-service articles: properly stored & used
46 Gloves used properly

Food Temperature Control

33 Proper cooling methods used; adequate equipment for temperature control
34 Plant food properly cooked for hot holding
35 Approved thawing methods used
36 Thermometers provided & accurate

Utensils, Equipment and Vending

47 ☒ Food & non-food contact surfaces cleanable, properly designed, constructed & used
48 Warewashing facilities: installed, maintained, & used; test strips
49 Non-food contact surfaces clean

Food Identification

37 Food properly labeled; original container

Physical Facilities

50 Hot & cold water available; adequate pressure
51 Plumbing installed; proper backflow devices
52 Sewage & waste water properly disposed
53 Toilet facilities: properly constructed, supplied, & cleaned
54 Garbage & refuse properly disposed; facilities maintained
55 Physical facilities installed, maintained, & clean
56 Adequate ventilation & lighting; designated areas used

Prevention of Food Contamination

38 Insects, rodents, & animals not present
39 ☒ Contamination prevented during food preparation, storage and display
40 Personal cleanliness
41 Wiping cloths: properly used & stored
42 Washing fruits & vegetables

57 SPECIAL REQUIREMENTS / OTHER ☐ Anti-choking (590.009(E)) ☐ Tobacco (590.009(F)) ☐ Allergen Awareness (590.009(G)) ☐ Local law regulation ☐ Other

Official Order for Correction: Based on an inspection today, the items checked indicate violations of the Board of Health Food Regulation / 2013 Federal Food Code. This report, when signed below by a Board of Health member or its agent constitutes an order of the Board of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If approved by this order, you have a right to a hearing. Your request must be in writing and submitted to the Board of Health at the above address within ten (10) calendar days of receipt of this order.

PIC's Signature: Lori Gerome

Print: LORE GEROME

Date: 5/11/19

Inspector's Signature: Jeffrey Buroy

Follow-up: YES/NO (circle one) Follow-up Date, if applicable: Next Routine

Food Establishment Inspection Form

Page 2 of 3

The Commonwealth of Massachusetts
City of Salem Board of Health
120 Washington Street, Salem MA 01970
(978) 741-1800

Establishment Name:

Bentley Academy Charter School

Date: 5/07/2019

TEMPERATURE OBSERVATIONS

Item / Location	Temp (°F)	Item / Location	Temp (°F)	Item / Location	Temp (°F)

OBSERVATIONS AND/OR CORRECTIVE ACTIONS

Violations cited in this report must be corrected within the time frames or as stated in Section 8-405.11 of the Food Code

Item Number	Code Section	P = Priority Item PF = Priority Foundation Item	Description of Violation
39	3-305.11		- Walk-in freezer has boxes of food stored on the ground. Store food items on pallets or shelves 6 or more inches off of the ground.
10	6-301.12	PF	- Handwashing sink near walk-in freezer lacks paper towels. Provide paper towels for handwashing sinks at all times.
47	4-501.11		- Food prep sink across from walk-in freezer is leaking water from the area where the bottom of the basin and drainage pipe connect. Have sink repaired so leaking no longer occurs.
55	6-501.12		- Walk-in refrigerator has dust collecting on its ceiling in front of the condenser. Remove dust.
54	Section 5-5		- Dumpsters found with lids open. Keep dumpster lids closed when not in use.
39	3-305.11		- A bag of ground whole wheat found on ground in dry storage room. Store food items on pallets or shelves 6 or more inches off of the ground.

Discussion with PIC:

Corrective Action Required

☐ No

☒ Yes

☐ Voluntary Compliance

☐ Employee Restriction / Exclusion

☐ Re-Inspection Scheduled

☐ Emergency Suspension

☐ Embargo

☐ Emergency Closure

☐ Voluntary Disposal

☐ Other

PIC's Signature: [Signature]

Date: 5/7/19

Inspector's Signature: [Signature]

Date: 5/07/2019

Food Establishment Inspection Form

Page 1 of 2

The Commonwealth of Massachusetts City of Salem Board of Health 120 Washington Street, Salem MA 01970 (978) 741-1800		# Violations Priority- Score (optional)	Priority foundation- Core-	Date <u>10/22/2018</u> Time In <u>9:30am</u> Time Out <u>10:30am</u>
Establishment Name <u>Carlton Elementary School</u> Establishment Address <u>10 Skerry Street</u> Telephone <u>978-875-3463</u> Owner <u>Salem Public Schools</u> Person-In-Charge (PIC) <u>Pamela Ryan</u> Inspector <u>Jeffrey Barosy</u>		Risk Category HACCP Y/N Permit #: Food Safety Training / Exp. Date <u>6/02/2023</u>		Type of Operation(s) <input checked="" type="checkbox"/> Food Service <input type="checkbox"/> Retail <input type="checkbox"/> Residential Kitchen <input type="checkbox"/> Mobile <input type="checkbox"/> Temporary <input type="checkbox"/> Caterer <input type="checkbox"/> Bed & Breakfast <input type="checkbox"/> Farmer's Market <input type="checkbox"/> Other: Type of Inspection <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Reinspection Previous Inspection Date: <input type="checkbox"/> Pre-Operation <input type="checkbox"/> Suspect Illness <input type="checkbox"/> General Complaint <input type="checkbox"/> HACCP <input type="checkbox"/> Other:

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance Status				Compliance Status			
Supervision				Time / Temperature Control for Safety			
1	IN	OUT	PIC present, demonstrates knowledge, and performs duties	17	IN	OUT	Proper disposal of returned, previously served, reconditioned & unsafe food
2	IN	OUT	N/A	18	IN	OUT	N/A
Employee Health				19	IN	OUT	N/A
3	IN	OUT	Management, food employee and conditional employee; knowledge, responsibilities and reporting	20	IN	OUT	N/A
4	IN	OUT	Proper use of restriction and exclusion	21	IN	OUT	N/A
5	IN	OUT	Procedures for responding to vomiting and diarrhea events	22	IN	OUT	N/A
Good Hygienic Practices				23	IN	OUT	N/A
6	IN	OUT	N/A	24	IN	OUT	N/A
7	IN	OUT	N/A	Consumer Advisory			
Preventing Contamination by Hands				25	IN	OUT	N/A
8	IN	OUT	N/A	Requirements for Highly Susceptible Populations (HSP)			
9	IN	OUT	N/A	26	IN	OUT	N/A
10	IN	OUT	N/A	Food / Color Additives and Toxic Substances			
Approved Source				27	IN	OUT	N/A
11	IN	OUT	N/A	28	IN	OUT	N/A
12	IN	OUT	N/A	Conformance with Approved Procedures			
13	IN	OUT	N/A	29	IN	OUT	N/A
14	IN	OUT	N/A	Risk Factors are important practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public health interventions are control measures to prevent foodborne illness or injury.			
Protection from Contamination							
15	IN	OUT	N/A				
16	IN	OUT	N/A				

GOOD RETAIL PRACTICES

Compliance Status				Compliance Status			
Safe Food and Water				Proper Use of Utensils			
30			Pasteurized eggs used where required	43			In-use utensils properly stored
31			Water & ice from approved source	44			Utensils, equipment & linens: properly stored, dried, & handled
32			Variance obtained for specialized processing methods	45			Single-use / single-service articles: properly stored & used
Food Temperature Control				46			Gloves used properly
33			Proper cooling methods used; adequate equipment for temperature control	Utensils, Equipment and Vending			
34			Plant food properly cooked for hot holding	47			Food & non-food contact surfaces cleanable, properly designed, constructed & used
35			Approved thawing methods used	48			Warewashing facilities: installed, maintained, & used; test strips
36			Thermometers provided & accurate	49			Non-food contact surfaces clean
Food Identification				Physical Facilities			
37			Food properly labeled; original container	50			Hot & cold water available; adequate pressure
Prevention of Food Contamination				51			Plumbing installed; proper backflow devices
38			Insects, rodents, & animals not present	52			Sewage & waste water properly disposed
39			Contamination prevented during food preparation, storage and display	53			Toilet facilities: properly constructed, supplied, & cleaned
40			Personal cleanliness	54			Garbage & refuse properly disposed; facilities maintained
41			Wiping cloths: properly used & stored	55			Physical facilities installed, maintained, & clean
42			Washing fruits & vegetables	56			Adequate ventilation & lighting; designated areas used

57 SPECIAL REQUIREMENTS / OTHER: ☐ Anti-choking (590.009(E)) ☐ Tobacco (590.009(F)) ☐ Allergen Awareness (590.009(G)) ☐ Local law regulation ☐ Other

Official Order for Correction: Based on an inspection today, the items checked indicate violations of the Board of Health Food Regulation / 2013 Federal Food Code. This report, when signed below by a Board of Health member or its agent constitutes an order of the Board of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If approved by this order, you have a right to a hearing. Your request must be in writing and submitted to the Board of Health at the above address within ten (10) calendar days of receipt of this order.

PIC's Signature: Pamela Ryan Print: Pamela Ryan Date: 10/22/18
 Inspector's Signature: Jeffrey Barosy Follow-up: YES/NO (circle one) Follow-up Date, if applicable: Next Routine

Food Establishment Inspection Form						Page <u>1</u> of <u>2</u>	
The Commonwealth of Massachusetts City of Salem Board of Health 120 Washington Street, Salem MA 01970 (978) 741-1800			# Violations		Date <u>May 8, 2019</u> Time In <u>9:51am</u> Time Out <u>10:45am</u>		
			Priority-	Priority foundation-			Core-
			Score (optional)				
Establishment Name <u>Carlton Elementary School</u>			Risk Category		Type of Operation(s)		
Establishment Address <u>10 Skerry Street</u>			HACCP Y/N		<input checked="" type="checkbox"/> Food Service <input type="checkbox"/> Retail <input type="checkbox"/> Residential Kitchen <input type="checkbox"/> Mobile <input type="checkbox"/> Temporary <input type="checkbox"/> Caterer <input type="checkbox"/> Bed & Breakfast <input type="checkbox"/> Farmer's Market <input type="checkbox"/> Other:		
Telephone <u>(978) 875-3463</u>			Permit #:		Type of Inspection <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Reinspection Previous Inspection Date:		
Owner <u>Salem Public School</u>			Food Safety Training / Exp. Date <u>6/2/2023</u>		<input type="checkbox"/> Pre-Operation <input type="checkbox"/> Suspect Illness <input type="checkbox"/> General Complaint <input type="checkbox"/> HACCP <input type="checkbox"/> Other:		
Person in Charge (PIC) <u>Pamela Ryan</u>							
Inspector <u>Janice Costa</u>							
FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS							
Circle designated compliance status (IN, OUT, N/A) for each numbered item IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable							
Compliance Status				Mark "X" in appropriate box for COS and/or R COS = corrected on-site during inspection R = repeat violation			
				Compliance Status			
Supervision				Time / Temperature Control for Safety			
1	IN	OUT	PIC present, demonstrates knowledge, and performs duties	17	IN	OUT	Proper disposition of returned, previously served, reconditioned & unsafe food
2	IN	OUT	N/A	18	IN	OUT	N/A
Employee Health				Proper cooking time & temperatures			
3	IN	OUT	Management, food employee and conditional employee; knowledge, responsibilities and reporting	19	IN	OUT	N/A
4	IN	OUT	Proper use of restriction and exclusion	20	IN	OUT	N/A
5	IN	OUT	Procedures for responding to vomiting and diarrheal events	21	IN	OUT	N/A
Good Hygienic Practices				Proper hot holding temperature			
6	IN	OUT	N/A	22	IN	OUT	N/A
7	IN	OUT	N/A	23	IN	OUT	N/A
Preventing Contamination by Hands				Proper cold holding temperature			
8	IN	OUT	N/A	24	IN	OUT	N/A
9	IN	OUT	N/A	Consumer Advisory			
10	IN	OUT	Adequate handwashing sinks properly supplied and accessible	25	IN	OUT	N/A
Approved Source				Requirements for Highly Susceptible Populations (HSP)			
11	IN	OUT	Food obtained from approved source	26	IN	OUT	N/A
12	IN	OUT	N/A	Food / Color Additives and Toxic Substances			
13	IN	OUT	Food received in good condition, safe, & unadulterated	27	IN	OUT	N/A
14	IN	OUT	N/A	28	IN	OUT	N/A
Protection from Contamination				Conformance with Approved Procedures			
15	IN	OUT	N/A	29	IN	OUT	N/A
16	IN	OUT	N/A	Risk Factors are important practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public health interventions are control measures to prevent foodborne illness or injury.			
GOOD RETAIL PRACTICES							
Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods. Mark "X" in box if numbered item is not in compliance Mark "X" in appropriate box for COS and/or R COS = corrected on-site during inspection R = repeat violation							
Compliance Status				Compliance Status			
Safe Food and Water				Proper Use of Utensils			
30			Pasteurized eggs used where required	43			In-use utensils properly stored
31			Water & ice from approved source	44			Utensils, equipment & linens: properly stored, dried, & handled
32			Variance obtained for specialized processing methods	45			Single-use / single-service articles: properly stored & used
Food Temperature Control				46			Gloves used properly
33			Proper cooling methods used; adequate equipment for temperature control	Utensils, Equipment and Vending			
34			Plant food properly cooked for hot holding	47			Food & non-food contact surfaces cleanable, properly designed, constructed & used
35			Approved thawing methods used	48			Warewashing facilities: installed, maintained, & used; test strips
36			Thermometers provided & accurate	49			Non-food contact surfaces clean
Food Identification				Physical Facilities			
37			Food properly labeled; original container	50			Hot & cold water available; adequate pressure
Prevention of Food Contamination				51			Plumbing installed; proper backflow devices
38			Insects, rodents, & animals not present	52			Sewage & waste water properly disposed
39			Contamination prevented during food preparation, storage and display	53			Toilet features: properly constructed, supplied, & cleaned
40			Personal cleanliness	54			Garbage & refuse properly disposed; facilities maintained
41			Wiping cloths: properly used & stored	55			Physical facilities installed, maintained, & clean
42			Washing fruits & vegetables	56			Adequate ventilation & lighting; designated areas used
57 SPECIAL REQUIREMENTS / OTHER <input type="checkbox"/> Anti-choking (590.009(E)) <input type="checkbox"/> Tobacco (590.009(F)) <input type="checkbox"/> Allergen Awareness (590.009(G)) <input type="checkbox"/> Local law regulation <input type="checkbox"/> Other							
Official Order for Correction: Based on an inspection today, the items checked indicate violations of the Board of Health Food Regulation / 2013 Federal Food Code. This report, when signed below by a Board of Health member or its agent constitutes an order of the Board of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have a right to a hearing. Your request must be in writing and submitted to the Board of Health at the above address within ten (10) calendar days of receipt of this order.							
PIC's Signature: <u>[Signature]</u>				Print: <u>Janice Costa</u>			
Inspector's Signature: <u>[Signature]</u>				Date: <u>5/8/19</u>			
				Follow-up: YES NO (circle one) Follow-up Date, if applicable: <u>Next Routine</u>			

Page 2 of 2

Date: 05/08/19

Establishment Name: Carlton Elementary School

Item / Location	Temp (°F)	Item / Location	Temp (°F)	Item / Location	Temp (°F)
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[illegible]

Violations cited in this report must be corrected within the time frames or as stated in Section 8-405.11 of the Food Code

[illegible]

Corrective Action Required

Den

☐ Yes

- | | |
|--------------------------------------------------|-----------------------------------------------------------|
| <input type="checkbox"/> Voluntary Compliance | <input type="checkbox"/> Employee Restriction / Exclusion |
| <input type="checkbox"/> Re-inspection Scheduled | <input type="checkbox"/> Emergency Suspension |
| <input type="checkbox"/> Embargo | <input type="checkbox"/> Emergency Closure |
| <input type="checkbox"/> Voluntary Disposal | <input type="checkbox"/> Other |

Date: 5/2/19

Date: May 8 2019

Food Establishment Inspection Form

Page 1 of 2

The Commonwealth of Massachusetts
City of Salem Board of Health
120 Washington Street, Salem MA 01970
(978) 741-1800

Violations 2
Priority- 0 Priority foundation- 1 Core- 1
Score (optional)

Date 11/05/2018
Time In 9:30am
Time Out 11:05am

Establishment Name Collins Middle School
Establishment Address 29 Highland Avenue

Risk Category

Type of Operation(s)

- ☒ Food Service
☐ Retail
☐ Residential Kitchen
☐ Mobile
☐ Temporary
☐ Caterer
☐ Bed & Breakfast
☐ Farmer's Market
☐ Other:

Type of Inspection

- ☒ Routine
☐ Reinspection
Previous Inspection Date:
☐ Pre-Operation
☐ Suspect Illness
☐ General Complaint
☐ HACCP
☐ Other:

Telephone 978-740-1196

HACCP Y/N

Owner Salem Public Schools

Permit #:

Person-in-Charge (PIC) Ivett Pectin

Food Safety Training / Exp. Date 11/11/2020

Inspector Jeffrey Barony

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Circle designated compliance status (IN, OUT, N/A) for each numbered item
IN = In compliance OUT = not in compliance N/A = not observed N/A = not applicable

Mark "X" in appropriate box for COS and/or R
COS = corrected on-site during inspection R = repeat violation

Compliance Status	COS	R	Compliance Status	COS	R
Supervision			Time / Temperature Control for Safety		
1 <input checked="" type="radio"/> IN <input type="radio"/> OUT			17 <input checked="" type="radio"/> IN <input type="radio"/> OUT		
2 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A			18 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
PIC present, demonstrates knowledge, and performs duties			19 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
Certified Food Protection Manager			20 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
Employee Health			21 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
3 <input checked="" type="radio"/> IN <input type="radio"/> OUT			22 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
Management, food employee and conditional employee; knowledge, responsibilities and reporting			23 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
4 <input checked="" type="radio"/> IN <input type="radio"/> OUT			24 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
Proper use of restriction and exclusion			25 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
5 <input checked="" type="radio"/> IN <input type="radio"/> OUT			26 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
Procedures for responding to vomiting and diarrheal events			27 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
Good Hygienic Practices			28 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
6 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A			29 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
Proper eating, tasting, drinking, or tobacco use			30 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
7 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A			31 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
No discharge from eyes, nose, and mouth			32 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
Preventing Contamination by Hands			33 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
8 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A			34 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
Hands clean & properly washed			35 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
9 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O			36 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
No bare hand contact with RTE food			37 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
10 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A			38 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
Adequate handwashing sinks properly supplied and accessible			39 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
Approved Source			40 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
11 <input checked="" type="radio"/> IN <input type="radio"/> OUT			41 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
Food obtained from approved source			42 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
12 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O			43 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
Food received at proper temperature			44 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
13 <input checked="" type="radio"/> IN <input type="radio"/> OUT			45 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
Food received in good condition, safe, & unadulterated			46 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
14 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O			47 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
Required records available: shellstock tags, parasite destruction			48 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
Protection from Contamination			49 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
15 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O			50 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
Food separated and protected			51 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
16 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A			52 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
Food-contact surfaces; cleaned & sanitized			53 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		

GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

Compliance Status	COS	R	Compliance Status	COS	R
Safe Food and Water			Proper Use of Utensils		
30 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O			43 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
Pasteurized eggs used where required			44 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
31 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O			45 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
Water & ice from approved source			46 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
32 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O			47 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
Variance obtained for specialized processing methods			48 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
Food Temperature Control			49 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
33 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O			50 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
Proper cooling methods used; adequate equipment for temperature control			51 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
34 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O			52 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
Plant food properly cooked for hot holding			53 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
35 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O			54 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
Approved thawing methods used			55 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
36 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O			56 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
Thermometers provided & accurate			57 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
Food Identification			58 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
37 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O			59 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
Food properly labeled; original container			60 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
Prevention of Food Contamination			61 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
38 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O			62 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
Insects, rodents, & animals not present			63 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
39 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O			64 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
Contamination prevented during food preparation, storage and display			65 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
40 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O			66 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
Personal cleanliness			67 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
41 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O			68 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
Wiping cloths: properly used & stored			69 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
42 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O			70 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
Washing fruits & vegetables			71 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		

57 SPECIAL REQUIREMENTS / OTHER ☐ Anti-choking (590.009(E)) ☐ Tobacco (590.009(F)) ☐ Allergen Awareness (590.009(G)) ☐ Local law regulation ☐ Other

Official Order for Correction: Based on an inspection today, the items checked indicate violations of the Board of Health Food Regulation / 2013 Federal Food Code. This report, when signed below by a Board of Health member or its agent constitutes an order of the Board of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have a right to a hearing. Your request must be in writing and submitted to the Board of Health at the above address within ten (10) calendar days of receipt of this order.

PIC's Signature: Ivett Pectin

Print: Ivett Pectin

Date: 11-5-18

Inspector's Signature: Jeffrey Barony

Follow-up: YES NO (circle one) Follow-up Date, if applicable: Next Routine

Page 2 of 2

Establishment Name:

Date: 11/05/2018

Item / Location

Temp (°F)

[illegible]

Temp (°F)

Item / Location	Quantity	Unit	Value
Item 1	10	kg	100
Item 2	5	kg	50
Item 3	2	kg	20
Item 4	1	kg	10
Item 5	1	kg	10
Item 6	1	kg	10
Item 7	1	kg	10
Item 8	1	kg	10
Item 9	1	kg	10
Item 10	1	kg	10
Item 11	1	kg	10
Item 12	1	kg	10
Item 13	1	kg	10
Item 14	1	kg	10
Item 15	1	kg	10
Item 16	1	kg	10
Item 17	1	kg	10
Item 18	1	kg	10
Item 19	1	kg	10
Item 20	1	kg	10
Item 21	1	kg	10
Item 22	1	kg	10
Item 23	1	kg	10
Item 24	1	kg	10
Item 25	1	kg	10
Item 26	1	kg	10
Item 27	1	kg	10
Item 28	1	kg	10
Item 29	1	kg	10
Item 30	1	kg	10
Item 31	1	kg	10
Item 32	1	kg	10
Item 33	1	kg	10
Item 34	1	kg	10
Item 35	1	kg	10
Item 36	1	kg	10
Item 37	1	kg	10
Item 38	1	kg	10
Item 39	1	kg	10
Item 40	1	kg	10
Item 41	1	kg	10
Item 42	1	kg	10
Item 43	1	kg	10
Item 44	1	kg	10
Item 45	1	kg	10
Item 46	1	kg	10
Item 47	1	kg	10
Item 48	1	kg	10
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Item 88	1	kg	10
Item 89	1	kg	10
Item 90	1	kg	10
Item 91	1	kg	10
Item 92	1	kg	10
Item 93	1	kg	10
Item 94	1	kg	10
Item 95	1	kg	10
Item 96	1	kg	10
Item 97	1	kg	10
Item 98	1	kg	10
Item 99	1	kg	10
Item 100	1	kg	10

Temp (°F)

Violations cited in this report must be corrected within the time frames or as stated in Section 8-405.11 of the Food Code

Item Number	Code Section	P = Priority Item PF = Priority Foundation Item	Description of Violation
10	5-202.12	PF	- Hot water at all hand washing sinks peaks at 71°F. Restore hot water to a temperature that is at or above 100°F.
47	4-502.11		- Soap dispenser for handwashing sink in dishwashing room is not working dispensing soap. Repair dispenser - so soap is dispensed when activated.
			NOTE: Food items not belonging to the kitchen were found inside of a refrigerator in the room between the kitchen and dishwashing room. Food items were held at 50°F (cheese slices), had expired, and were covered in mold and grease. The food items were stored there by Evelyn Oquendo, a member of the school's gym staff, with the intent to give ^{give} them at fall sports ^{sporting} events at the school. She discarded all of the adulterated food items on site. In the future, store food items in units that can hold food at or below 41°F and check periodically to ensure it was not adulterated.

Discussion with PIC:

Corrective Action Required

☐ No☒ Voluntary Compliance☐ Employee Restriction / Exclusion☐ Re-inspection Scheduled☐ Emergency Suspension☐ Embargo☐ Emergency Closure☐ Voluntary Disposal☐ Other**PLC's Signature:**

Date: 11-5-18

Inspector's Signature _____

Date: 11/05/2018

Food Establishment Inspection Form						Page <u>1</u> of <u>2</u>	
The Commonwealth of Massachusetts City of Salem Board of Health 120 Washington Street, Salem MA 01970 (978) 741-1800			# Violations <u>3</u>		Date <u>5/08/2019</u>		
			Priority- <u>1</u> Priority foundation- <u>0</u> Core- <u>2</u>		Time In <u>9:30am</u>		
			Score (optional) _____		Time Out <u>12:00pm</u>		
Establishment Name <u>Collins Middle School</u>			Risk Category _____		Type of Operation(s) <input checked="" type="checkbox"/> Food Service <input type="checkbox"/> Retail <input type="checkbox"/> Residential Kitchen <input type="checkbox"/> Mobile <input type="checkbox"/> Temporary <input type="checkbox"/> Caterer <input type="checkbox"/> Bed & Breakfast <input type="checkbox"/> Farmer's Market <input type="checkbox"/> Other: _____		
Establishment Address <u>29 Highland Avenue</u>			HACCP Y/N _____		Type of Inspection <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Reinspection Previous Inspection Date: _____		
Telephone <u>978-746-1196</u>			Permit #: _____		<input type="checkbox"/> Pre-Operation <input type="checkbox"/> Suspect Illness <input type="checkbox"/> General Complaint <input type="checkbox"/> HACCP <input type="checkbox"/> Other: _____		
Owner <u>Salem Public Schools</u>			Food Safety Training/Exp. Date <u>11/13/2020</u>				
Person-in-Charge (PIC) <u>Irvell + Perrin</u>							
Inspector <u>Jeffrey Bascary</u>							
FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS							
Circle designated compliance status (IN, OUT, N/O, N/A) for each numbered item IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable							
Compliance Status				Compliance Status			
Supervision				Time / Temperature Control for Safety			
1	IN	OUT	PIC present, demonstrates knowledge, and performs duties	17	IN	OUT	Proper disposition of returned, previously served, reconditioned & unsafe food
2	IN	OUT	Certified Food Protection Manager	18	IN	OUT	Proper cooking time & temperatures
Employee Health				19	IN	OUT	Proper reheating procedures for hot holding
3	IN	OUT	Management, food employee and conditional employee; knowledge, responsibilities and reporting	20	IN	OUT	Proper cooling time and temperature
4	IN	OUT	Proper use of restriction and exclusion	21	IN	OUT	Proper hot holding temperature
5	IN	OUT	Procedures for responding to vomiting and diarrheal events	22	IN	OUT	Proper cold holding temperature
Good Hygienic Practices				23	IN	OUT	Proper date marking and disposition
6	IN	OUT	Proper eating, tasting, drinking, or tobacco use	24	IN	OUT	Time as a Public Health Control
7	IN	OUT	No discharge from eyes, nose, and mouth	Consumer Advisory			
Preventing Contamination by Hands				25	IN	OUT	Consumer advisory provided for raw / undercooked food
8	IN	OUT	Hands clean & properly washed	Requirements for Highly Susceptible Populations (HSP)			
9	IN	OUT	No bare hand contact with RTE food	26	IN	OUT	Pasteurized foods used; prohibited foods not offered
10	IN	OUT	Adequate handwashing sinks properly supplied and accessible	Food / Color Additives and Toxic Substances			
Approved Source				27	IN	OUT	Food additives: approved & properly used
11	IN	OUT	Food obtained from approved source	28	IN	OUT	Toxic sub. properly identified, stored & used
12	IN	OUT	Food received at proper temperature	Conformance with Approved Procedures			
13	IN	OUT	Food received in good condition, safe, & unadulterated	29	IN	OUT	Compliance with variance / specialized process / HACCP Plan
14	IN	OUT	Required records available: shellstock tags, parasite destruction	Risk Factors are important practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public health interventions are control measures to prevent foodborne illness or injury.			
Protection from Contamination							
15	IN	OUT	Food separated and protected				
16	IN	OUT	Food-contact surfaces: cleaned & sanitized				
GOOD RETAIL PRACTICES							
Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.							
Mark "X" in box if numbered item is not in compliance				Mark "X" in appropriate box for COS and/or R			
Compliance Status				Compliance Status			
Safe Food and Water				Proper Use of Utensils			
30			Pasteurized eggs used where required	43			In-use utensils properly stored
31			Water & ice from approved source	44			Utensils, equipment & linens: properly stored, dried, & handled
32			Variance obtained for specialized processing methods	45			Single-use / single-service articles: properly stored & used
Food Temperature Control				46			Gloves used properly
33			Proper cooling methods used; adequate equipment for temperature control	Utensils, Equipment and Vending			
34			Plant food properly cooked for hot holding	47	X		Food & non-food contact surfaces cleanable, properly designed, constructed & used
35			Approved thawing methods used	48			Warewashing facilities: installed, maintained, & used; test strips
36			Thermometers provided & accurate	49			Non-food contact surfaces clean
Food Identification				Physical Facilities			
37			Food properly labeled; original container	50			Hot & cold water available; adequate pressure
Prevention of Food Contamination				51			Plumbing installed; proper backflow devices
38			Insects, rodents, & animals not present	52			Sewage & waste water properly disposed
39			Contamination prevented during food preparation, storage and display	53			Toilet features: properly constructed, supplied, & cleaned
40			Personal cleanliness	54	X		Garbage & refuse properly disposed; facilities maintained
41			Wiping cloths: properly used & stored	55			Physical facilities installed, maintained, & clean
42			Washing fruits & vegetables	56			Adequate ventilation & lighting; designated areas used
SPECIAL REQUIREMENTS / OTHER <input type="checkbox"/> Anti-choking (590.009(E)) <input type="checkbox"/> Tobacco (590.009(F)) <input type="checkbox"/> Allergen Awareness (590.009(G)) <input type="checkbox"/> Local law regulation <input type="checkbox"/> Other _____							
Official Order for Correction: Based on an inspection today, the items checked indicate violations of the Board of Health Food Regulation / 2013 Federal Food Code. This report, when signed below by a Board of Health member or its agent constitutes an order of the Board of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have a right to a hearing. Your request must be in writing and submitted to the Board of Health at the above address within ten (10) calendar days of receipt of this report.							
PIC's Signature: _____				Print: <u>Irvell + Perrin</u>		Date: <u>05/08/19</u>	
Inspector's Signature: <u>Jeffrey Bascary</u>				Follow-up: YES <u>NO</u> (circle one)		Follow-up Date, if applicable: <u>Next Routine</u>	

Food Establishment Inspection Form

Page 2 of 2

The Commonwealth of Massachusetts
City of Salem Board of Health
120 Washington Street, Salem MA 01970
(978) 741-1800

Establishment Name:

Collins Middle School

Date: 5/08/2019

TEMPERATURE OBSERVATIONS

Item / Location	Temp (°F)	Item / Location	Temp (°F)	Item / Location	Temp (°F)

OBSERVATIONS AND/OR CORRECTIVE ACTIONS

Violations cited in this report must be corrected within the time frames or as stated in Section 8-405.11 of the Food Code

Item Number	Code Section	P = Priority Item PF = Priority Foundation Item	Description of Violation
<u>18</u>	<u>4-502.114</u>	<u>P</u>	- Dishwashing machine's rinse cycle is failing to raise the surface temperature of washed equipment to be at or above 180°F (temperature observe - 158.4°F). Repair or adjust machine so rinse cycle water is between 180°F and 190°F so that equipments' surface temperature reaches 160°F.
<u>47</u>	<u>4-502.11(A)(1)</u>		- Dishwashing machine's "Rinse" temperature gauge is not working. It was observed with it needle stuck at 120°F. Repair "Rinse" gauge so that it displays actual temperature of Rinse water. <u>NOTE:</u> Until dishwashing machine's rinse cycle reaches proper temperature, all washed equipment is to be sprayed on all surfaces with available quat sanitizer and allowed to air dry for 30 seconds.
<u>54</u>	<u>Section 5-5</u>		- Garbage dumpster has missing lid and recycling dumpster's lid found open. Dumpsters are to have proper lids and are to remain closed when not in use.

Discussion with PIC:

Corrective Action Required

☐ No

☒ Yes

☐ Voluntary Compliance

☐ Employee Restriction / Exclusion

☐ Re-inspection Scheduled

☐ Emergency Suspension

☐ Embargo

☐ Emergency Closure

☐ Voluntary Disposal

☐ Other

PIC's Signature: [Signature]

Date: 5/08/19

Inspector's Signature: [Signature]

Date: 5/08/2019

Food Establishment Inspection Form

Page 1 of 3

The Commonwealth of Massachusetts
City of Salem Board of Health
120 Washington Street, Salem MA 01970
(978) 741-1800

Violations 5
Priority- 1 Priority foundation- 2 Core- 2
Score (optional)

Date 9/19/2018
Time In 10:00am
Time Out 11:40am

Establishment Name Horace Mann Laboratory
Establishment Address 75 Willson Street

Telephone 978-825-3440 HACCP Y/N

Owner Salem Public Schools Permit #

Person-in-Charge (PIC) Adriana Cunha Food Safety Training / Exp. Date 6/02/2023

Inspector Jeffrey Barozz

Risk Category

Type of Operation(s)

- ☒ Food Service
☐ Retail
☐ Residential Kitchen
☐ Mobile
☐ Temporary
☐ Caterer
☐ Bed & Breakfast
☐ Farmer's Market
☐ Other:

Type of Inspection

- ☒ Routine
☐ Reinspection
Previous Inspection Date:
☐ Pre-Operation
☐ Suspect Illness
☒ General Complaint
☐ HACCP
☐ Other:

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Circle designated compliance status (IN, OUT, N/O, N/A) for each numbered item
IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Mark "X" in appropriate box for COS and/or R
COS = corrected on-site during inspection R = repeat violation

Compliance Status

COS R

Compliance Status

COS R

Supervision

- 1 ☒ IN ☐ OUT PIC present, demonstrates knowledge, and performs duties
2 ☒ IN ☐ OUT ☐ N/A Certified Food Protection Manager

Employee Health

- 3 ☒ IN ☐ OUT Management, food employee and conditional employees; knowledge, responsibilities and reporting
4 ☒ IN ☐ OUT Proper use of restriction and exclusion
5 ☒ IN ☐ OUT Procedures for responding to vomiting and diarrheal events

Good Hygienic Practices

- 6 ☒ IN ☐ OUT ☐ N/A Proper eating, tasting, drinking, or tobacco use
7 ☒ IN ☐ OUT ☐ N/A No discharge from eyes, nose, and mouth

Preventing Contamination by Hands

- 8 ☒ IN ☐ OUT ☐ N/A Hands clean & properly washed
9 ☒ IN ☐ OUT ☐ N/A No bare hand contact with RTE food
10 ☒ IN ☐ OUT Adequate handwashing sinks properly supplied and accessible

Approved Source

- 11 ☒ IN ☐ OUT Food obtained from approved source
12 ☒ IN ☐ OUT ☐ N/A ☐ N/A Food received at proper temperature
13 ☒ IN ☐ OUT Food received in good condition, safe, & unadulterated
14 ☒ IN ☐ OUT ☐ N/A ☐ N/A Required records available; shellstock tags, parasite destruction

Protection from Contamination

- 15 ☒ IN ☐ OUT ☐ N/A ☐ N/A Food separated and protected
16 ☒ IN ☐ OUT ☐ N/A Food-contact surfaces; cleaned & sanitized

Proper disposition of returned, previously served, reconditioned & unsafe food

Time / Temperature Control for Safety

- 17 ☒ IN ☐ OUT ☐ N/A Proper cooking time & temperatures
18 ☒ IN ☐ OUT ☐ N/A ☐ N/A Proper reheating procedures for hot holding
19 ☒ IN ☐ OUT ☐ N/A ☐ N/A Proper cooling time and temperature
20 ☒ IN ☐ OUT ☐ N/A ☐ N/A Proper hot holding temperature
21 ☒ IN ☐ OUT ☐ N/A ☐ N/A Proper cold holding temperature
22 ☒ IN ☐ OUT ☐ N/A ☐ N/A Proper date marking and disposition
23 ☒ IN ☐ OUT ☐ N/A ☐ N/A Time as a Public Health Control
24 ☒ IN ☐ OUT ☐ N/A ☐ N/A

Consumer Advisory

- 25 ☒ IN ☐ OUT ☐ N/A Consumer advisory provided for raw / undercooked food

Requirements for Highly Susceptible Populations (HSP)

- 26 ☒ IN ☐ OUT ☐ N/A Pasteurized foods used; prohibited foods not offered

Food / Color Additives and Toxic Substances

- 27 ☒ IN ☐ OUT ☐ N/A Food additives: approved & properly used
28 ☒ IN ☐ OUT ☐ N/A Toxic sub. properly identified, stored & used

Conformance with Approved Procedures

- 29 ☒ IN ☐ OUT ☐ N/A Compliance with variance / specialized process / HACCP Plan

Risk Factors are important practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public health interventions are control measures to prevent foodborne illness or injury.

GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

Mark "X" in box if numbered item is not in compliance

Mark "X" in appropriate box for COS and/or R

COS = corrected on-site during inspection

R = repeat violation

Compliance Status

COS R

Compliance Status

COS R

Safe Food and Water

- 30 Pasteurized eggs used where required
31 Water & ice from approved source
32 Variance obtained for specialized processing methods

Food Temperature Control

- 33 Proper cooling methods used; adequate equipment for temperature control
34 Plant food properly cooked for hot holding
35 Approved thawing methods used
36 Thermometers provided & accurate

Food Identification

- 37 Food properly labeled; original container

Prevention of Food Contamination

- 38 Insects, rodents, & animals not present
39 Contamination prevented during food preparation, storage and display
40 Personal cleanliness
41 Wiping cloths: properly used & stored
42 Washing fruits & vegetables

Proper Use of Utensils

- 43 In-use utensils properly stored
44 Utensils, equipment & linens: properly stored, dried, & handled
45 Single-use / single-service articles: properly stored & used
46 Gloves used properly

Utensils, Equipment and Vending

- 47 ☒ X Food & non-food contact surfaces cleanable, properly designed, constructed & used
48 Warewashing facilities: installed, maintained, & used; test strips
49 Non-food contact surfaces clean

Physical Facilities

- 50 Hot & cold water available; adequate pressure
51 Plumbing installed; proper backflow devices
52 Sewage & waste water properly disposed
53 Toilet features: properly constructed, supplied, & cleaned
54 ☒ X Garbage & refuse properly disposed; facilities maintained
55 Physical facilities installed, maintained, & clean
56 Adequate ventilation & lighting; designated areas used

57 SPECIAL REQUIREMENTS / OTHER

☐ Anti-choking (590.009(E)) ☐ Tobacco (590.009(F)) ☐ Allergen Awareness (590.009(G)) ☐ Local law regulation ☐ Other

Official Order for Correction: Based on an inspection today, the items checked indicate violations of the Board of Health Food Regulation / 2013 Federal Food Code. This report, when signed below by a Board of Health member or its agent constitutes an order of the Board of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have a right to a hearing. Your request must be in writing and submitted to the Board of Health at the above address within ten (10) calendar days of receipt of this order.

PIC's Signature: *Adriana Cunha*
Inspector's Signature: *Jeffrey Barozz*

Print: *Adriana Cunha*
Follow-up: YES NO (circle one) Follow-up Date, if applicable: *Next Routine*

Date: *9-19-18*

Food Establishment Inspection Form

Page 2 of 3

The Commonwealth of Massachusetts
City of Salem Board of Health
120 Washington Street, Salem MA 01970
(978) 741-1800

Establishment Name:

Horace Mann Laboratory

Date: 9/19/2018

TEMPERATURE OBSERVATIONS

Item / Location	Temp (°F)	Item / Location	Temp (°F)	Item / Location	Temp (°F)

OBSERVATIONS AND/OR CORRECTIVE ACTIONS

Violations cited in this report must be corrected within the time frames or as stated in Section 8-405.11 of the Food Code

Item Number	Code Section	P = Priority Item PF = Priority Foundation Item	Description of Violation
			<i>The Salem Board of Health responded to a complaint which claimed the kitchen lacked a 3 bay sink, the dishwashing machine was not working, and there was no hot water. As part of the inspector's investigation, a routine inspection was conducted. The following was noted:</i>
<i>10</i>	<i>5-205.11</i>	<i>PF</i>	<i>- 3 bay sink's right side faucet lacks hot and cold water. Restore water to this faucet and have hot water be at or above 100°F.</i>
<i>21</i> <i>47</i>	<i>3-50A.16(A)</i> <i>4-50A.11</i>	<i>P</i>	<i>- Food warmer cabinet nearest dishwashing machine found hot holding cooked carrots at 112°F despite being set to 150°F. Raised temperature of carrots to 135°F. Have warmer repaired or adjusted so it hot holds food items at or above 135°F. (Carrots placed in a steam table and brought to temperature)</i>
<i>17</i>	<i>3-701.11</i>	<i>P</i>	<i>- Dented can of diced tomatoes found in dry storage room. Discard damaged can. (Corrected on site)</i>

Discussion with PIC:

Corrective Action Required

☐ No

☒ Yes

☐ Voluntary Compliance

☐ Employee Restriction / Exclusion

☐ Re-Inspection Scheduled

☐ Emergency Suspension

☐ Embargo

☐ Emergency Closure

☐ Voluntary Disposal

☐ Other

PIC's Signature: *[Signature]*

Date: 9-19-18

Inspector's Signature: *[Signature]*

Date: 9/19/2018

Food Establishment Inspection Form						Page <u>1</u> of <u>2</u>	
The Commonwealth of Massachusetts City of Salem Board of Health 120 Washington Street, Salem MA 01970 (978) 741-1800			# Violations <u>4</u>		Date <u>5/20/2019</u> Time In <u>9:30am</u> Time Out <u>10:35am</u>		
			Priority- <u>0</u> Priority foundation- <u>1</u> Core- <u>3</u> Score (optional) _____				
Establishment Name <u>Horace Mann School</u> Establishment Address <u>79 Willson Street</u> Telephone <u>978-825-3440</u> Owner <u>Salem Public Schools</u> Person-In-Charge (PIC) <u>Adriana Cihna</u> Inspector <u>Jeffrey Barosy</u>			Risk Category _____ HACCP Y/N _____ Permit #: _____ Food Safety Training / Exp. Date <u>6/02/2023</u>		Type of Operation(s) <input checked="" type="checkbox"/> Food Service <input type="checkbox"/> Retail <input type="checkbox"/> Residential Kitchen <input type="checkbox"/> Mobile <input type="checkbox"/> Temporary <input type="checkbox"/> Caterer <input type="checkbox"/> Bed & Breakfast <input type="checkbox"/> Farmer's Market <input type="checkbox"/> Other: _____		
					Type of Inspection <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Reinspection Previous Inspection Date: _____ <input type="checkbox"/> Pre-Operation <input type="checkbox"/> Suspect Illness <input type="checkbox"/> General Complaint <input type="checkbox"/> HACCP <input type="checkbox"/> Other: _____		
FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS							
Circle designated compliance status (IN, OUT, N/O, N/A) for each numbered item IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable				Mark "X" in appropriate box for COS and/or R COS = corrected on-site during inspection R = repeat violation			
Compliance Status		COS		R		Compliance Status	
Supervision						Time / Temperature Control for Safety	
1	<input checked="" type="radio"/> IN <input type="radio"/> OUT	PIC present, demonstrates knowledge, and performs duties				17	<input checked="" type="radio"/> IN <input type="radio"/> OUT
2	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A	Certified Food Protection Manager				18	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O
Employee Health						19	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O
3	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Management, food employee and conditional employee; knowledge, responsibilities and reporting				20	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O
4	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Proper use of restriction and exclusion				21	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O
5	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Procedures for responding to vomiting and diarrheal events				22	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O
Good Hygienic Practices						23	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O
6	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/O	Proper eating, tasting, drinking, or tobacco use				24	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O
7	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/O	No discharge from eyes, nose, and mouth				Consumer Advisory	
Preventing Contamination by Hands						25	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A
8	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/O	Hands clean & properly washed				Requirements for Highly Susceptible Populations (HSP)	
9	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	No bare hand contact with RTE food				26	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A
10	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Adequate handwashing sinks properly supplied and accessible				Food / Color Additives and Toxic Substances	
Approved Source						27	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A
11	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Food obtained from approved source				28	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A
12	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	Food received at proper temperature				Conformance with Approved Procedures	
13	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Food received in good condition, safe, & unadulterated				29	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A
14	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	Required records available: shellstock tags, parasite destruction				Risk Factors are important practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public health interventions are control measures to prevent foodborne illness or injury.	
Protection from Contamination							
15	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	Food separated and protected					
16	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A	Food-contact surfaces; cleaned & sanitized					
GOOD RETAIL PRACTICES							
Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.							
Mark "X" in box if numbered item is not in compliance		Mark "X" in appropriate box for COS and/or R		COS = corrected on-site during inspection		R = repeat violation	
Compliance Status		COS		R		Compliance Status	
Safe Food and Water						Proper Use of Utensils	
30	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Pasteurized eggs used where required				43	<input checked="" type="radio"/> IN <input type="radio"/> OUT
31	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Water & ice from approved source				44	<input checked="" type="radio"/> IN <input type="radio"/> OUT
32	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Variance obtained for specialized processing methods				45	<input checked="" type="radio"/> IN <input type="radio"/> OUT
Food Temperature Control						46	<input checked="" type="radio"/> IN <input type="radio"/> OUT
33	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Proper cooling methods used; adequate equipment for temperature control				Utensils, Equipment and Vending	
34	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Plant food properly cooked for hot holding				47	<input checked="" type="radio"/> IN <input type="radio"/> OUT
35	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Approved thawing methods used				48	<input checked="" type="radio"/> IN <input type="radio"/> OUT
36	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Thermometers provided & accurate				49	<input checked="" type="radio"/> IN <input type="radio"/> OUT
Food Identification						Physical Facilities	
37	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Food properly labeled; original container				50	<input checked="" type="radio"/> IN <input type="radio"/> OUT
Prevention of Food Contamination						51	<input checked="" type="radio"/> IN <input type="radio"/> OUT
38	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Insects, rodents, & animals not present				52	<input checked="" type="radio"/> IN <input type="radio"/> OUT
39	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Contamination prevented during food preparation, storage and display				53	<input checked="" type="radio"/> IN <input type="radio"/> OUT
40	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Personal cleanliness				54	<input checked="" type="radio"/> IN <input type="radio"/> OUT
41	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Wiping cloths: properly used & stored				55	<input checked="" type="radio"/> IN <input type="radio"/> OUT
42	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Washing fruits & vegetables				56	<input checked="" type="radio"/> IN <input type="radio"/> OUT
SPECIAL REQUIREMENTS / OTHER <input type="checkbox"/> Anti-choking (590.009(E)) <input type="checkbox"/> Tobacco (590.009(F)) <input type="checkbox"/> Allergen Awareness (590.009(G)) <input type="checkbox"/> Local law regulation <input type="checkbox"/> Other _____							
Official Order for Correction: Based on an inspection today, the items checked indicate violations of the Board of Health Food Regulation / 2013 Federal Food Code. This report, when signed below by a Board of Health member or its agent constitutes an order of the Board of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have a right to a hearing. Your request must be in writing and submitted to the Board of Health at the above address within ten (10) calendar days of receipt of this order.							
PIC's Signature: <u>Adriana Cihna</u>				Print: <u>Adriana Cihna</u>		Date: <u>5/20/19</u>	
Inspector's Signature: <u>Jeffrey Barosy</u>				Follow-up: YES <input checked="" type="radio"/> NO <input type="radio"/> (circle one)		Follow-up Date, if applicable: <u>Next Routine</u>	

Page 2 of 2

Establishment Name:

Date: 5/20/2019

[illegible]

Violations cited in this report must be corrected within the time frames or as stated in Section 8-405.11 of the Food Code

Item Number	Code Section	P = Priority Item PF = Priority Foundation Item	Description of Violation
39	7-303.12		- Walk-in refrigerator has a water leak drip coming from a seam at the center of the ceiling. Find cause of dripping and repair. Refrain from storing food items directly below leak point of water drip.
47	4-501.11		
10	5-202.12	PF	- Hot water in staff bathroom sink peaks a 81°F. Repair or adjust this sink so hot water is at or above 100°F.
54	Section 5-5		- Dumpster has missing lids. A bag of garbage was found on the ground beside dumpster. Provide lids for dumpster and keep dumpster close when not in use. Store garbage bag in dumpster.

Corrective Action Required

☐ No☒ Yes☐ Voluntary Compliance☐ Employee Restriction / Exclusion☐ Re-inspection Scheduled☐ Emergency Suspension

☐ Embargo

Emergency Closure

☐ **Voluntary Disposal**☐ Other

PLC's Signature:

Answer

Date: 5-20-19

Inspector's Signature _____

Jeffrey Barony

Date: 5/20/2019

Food Establishment Inspection Form

Page 1 of 3

The Commonwealth of Massachusetts
City of Salem Board of Health
120 Washington Street, Salem MA 01970
(978) 741-1800

Violations 8
Priority- 2 Priority foundation- Core- 5
Score (optional)

Date Nov 1 2018
Time In 9:22 am
Time Out 12:17 pm

Establishment Name Salem High School
Establishment Address 77 Williston Street

Risk Category

Type of Operation(s)

- ☒ Food Service
☐ Retail
☐ Residential Kitchen
☐ Mobile
☐ Temporary
☐ Caterer
☐ Bed & Breakfast
☐ Farmer's Market
☐ Other:

Type of Inspection

- ☒ Routine
☐ Reinspection
Previous Inspection Date:
☐ Pre-Operation
☐ Suspect Illness
☐ General Complaint
☐ HACCP
☐ Other:

Telephone 978-740-1116
Owner Salem Public School

HACCP PLAN

Person-In-Charge (PIC) Leonard Gibney

Permit #: Food Safety Training / Exp. Date 11/20/20

Inspector Jeffrey Burns / Tarrice Ortiz

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Circle designated compliance status (IN, OUT, N/A) for each numbered item
IN = in compliance OUT = not in compliance N/A = not observed N/A = not applicable

Mark "X" in appropriate box for COS and/or R
COS = corrected on-site during inspection R = repeat violation

Compliance Status COS R

Compliance Status COS R

Supervision

- 1 ☒ IN ☐ OUT PIC present, demonstrates knowledge, and performs duties
2 ☒ IN ☐ OUT ☐ N/A Certified Food Protection Manager

Employee Health

- 3 ☒ IN ☐ OUT Management, food employee and conditional employee; knowledge, responsibilities and reporting
4 ☒ IN ☐ OUT Proper use of restriction and exclusion
5 ☒ IN ☐ OUT Procedures for responding to vomiting and diarrheal events

Good Hygienic Practices

- 6 ☒ IN ☐ OUT ☒ N/A Proper eating, testing, drinking, or tobacco use
7 ☒ IN ☐ OUT ☒ N/A No discharge from eyes, nose, and mouth

Preventing Contamination by Hands

- 8 ☒ IN ☐ OUT ☐ N/A Hands clean & properly washed
9 ☒ IN ☐ OUT ☐ N/A No bare hand contact with RTE food
10 ☒ IN ☐ OUT Adequate handwashing sinks properly supplied and accessible

Approved Source

- 11 ☒ IN ☐ OUT Food obtained from approved source
12 ☒ IN ☐ OUT ☐ N/A Food received at proper temperature
13 ☒ IN ☐ OUT Food received in good condition, safe, & unadulterated
14 ☒ IN ☐ OUT ☐ N/A Required records available: shellstock tags, parasite destruction

Protection from Contamination

- 15 ☒ IN ☐ OUT ☐ N/A Food separated and protected
16 ☒ IN ☐ OUT ☐ N/A Food-contact surfaces; cleaned & sanitized

GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

Mark "X" in box if numbered item is not in compliance

Mark "X" in appropriate box for COS and/or R

COS = corrected on-site during inspection

R = repeat violation

Compliance Status COS R

Compliance Status COS R

Safe Food and Water

- 30 ☒ Pasteurized eggs used where required
31 ☒ Water & ice from approved source
32 ☒ Variance obtained for specialized processing methods

Food Temperature Control

- 33 ☒ Proper cooling methods used; adequate equipment for temperature control
34 ☒ Plant food properly cooked for hot holding
35 ☒ Approved thawing methods used
36 ☒ Thermometers provided & accurate

Food Identification

- 37 ☒ Food properly labeled; original container

Prevention of Food Contamination

- 38 ☒ Insects, rodents, & animals not present
39 ☒ Contamination prevented during food preparation, storage and display
40 ☒ Personal cleanliness
41 ☒ Wiping cloths: properly used & stored
42 ☒ Washing fruits & vegetables

Proper Use of Utensils

- 43 ☒ In-use utensils properly stored
44 ☒ Utensils, equipment & linens: properly stored, dried, & handled
45 ☒ Single-use / single-service articles: properly stored & used
46 ☒ Gloves used properly

Utensils, Equipment and Vending

- 47 ☒ Food & non-food contact surfaces cleanable, properly designed, constructed & used
48 ☒ Warewashing facilities: installed, maintained, & used; last strips
49 ☒ Non-food contact surfaces clean

Physical Facilities

- 50 ☒ Hot & cold water available; adequate pressure
51 ☒ Plumbing installed; proper backflow devices
52 ☒ Sewage & waste water properly disposed
53 ☒ Toilet features: properly constructed, supplied, & cleaned
54 ☒ Garbage & refuse properly disposed; facilities maintained
55 ☒ Physical facilities installed, maintained, & clean
56 ☒ Adequate ventilation & lighting; designated areas used

57 SPECIAL REQUIREMENTS / OTHER ☐ Anti-choking (590.009(E)) ☐ Tobacco (590.009(F)) ☐ Allergen Awareness (590.009(G)) ☐ Local law regulation ☐ Other

Official Order for Correction: Based on an inspection today, the items checked indicate violations of the Board of Health Food Regulation / 2013 Federal Food Code. This report, when signed below by a Board of Health member or its agent constitutes an order of the Board of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have a right to a hearing. Your request must be in writing and submitted to the Board of Health at the above address within ten (10) calendar days of receipt of this order.

PIC's Signature: Leonard Gibney

Print: Leonard Gibney

Date: 11-7-18

Inspector's Signature: Jeffrey Burns / Tarrice Ortiz

Follow-up: YES NO (circle one) Follow-up Date, if applicable: Next Routine

Food Establishment Inspection Form

Page 2 of 3

The Commonwealth of Massachusetts
City of Salem Board of Health
120 Washington Street, Salem MA 01970
(978) 741-1800

Establishment Name: Salem High School

Date: Nov 7 2018

TEMPERATURE OBSERVATIONS

Item / Location	Temp (°F)	Item / Location	Temp (°F)	Item / Location	Temp (°F)

OBSERVATIONS AND/OR CORRECTIVE ACTIONS

Violations cited in this report must be corrected within the time frames or as stated in Section 8-405.11 of the Food Code

Item Number	Code Section	P = Priority Item PF = Priority Foundation Item	Description of Violation
10	10-301.12	PF	Paper towel still inside package. Remove paper towel from packaging to allow for proper usage.
351	3-305.11		Wax in freezer Buggy had cardboard boxes on the floor. Store food items 6 inches off the floor.
17	2-701.11	P	Sliced peach can found with a dent on top. Discard peach can. (Corrected on site)
555	10-501.12		Ceilings above food Prep Station has black unidentifiable Scum on Dropped Ceiling. Clean up Scum.
39	3-305.11		Iceberg lettuce and potatoes cardboard boxes inside walk in Refrigerator are located on the floor. Store food items 6 inches off the floor. (Corrected on site)
37	3-302.11		Plastic bins filled with muffin base and bread crumbs is unlabeled. Label Bins.

Discussion with PIC:

Corrective Action Required

☐ No

☐ Yes

☐ Voluntary Compliance

☐ Employee Restriction / Exclusion

☐ Re-inspection Scheduled

☐ Emergency Suspension

☐ Embargo

☐ Emergency Closure

☐ Voluntary Disposal

☐ Other

PIC's Signature: [Signature]

Date: 11-7-18

Inspector's Signature: [Signature]

Date: Nov 7 2018

Page 3 of 3

Establishment Name: Salem High School

Date: NOV 9 1971

Violations cited in this report must be corrected within the time frames or as stated in Section 8-405.11 of the Food Code

Item Number	Code Section	P = Priority Item PF = Priority Foundation Item	Description of Violation
28	7-202.07	P	Rodent trap box found located on top of appearance (ins) Remove. Rodent trap from above food item. administer Rodent traps and toxic materials properly (Corrected on site)
36	4-2014.112		Milk Refrigerator located on the first floor Cafeteria has a broken thermometer. Replace thermometer with a working one (Corrected on site)

PIC's Signature:

Richard

Date: 11-7-18

Inspector's Signature _____

Robert Jeffrey Bawing

Date: NOV 12 2018

Food Establishment Inspection Form

Page 1 of 2

The Commonwealth of Massachusetts
City of Salem Board of Health
120 Washington Street, Salem MA 01970
(978) 741-1800

Violations 3
Priority- 0 Priority foundation- 1 Core- 2
Score (optional)

Date 5/23/2019
Time In 9:30am
Time Out 11:40am

Establishment Name Salem High School
Establishment Address 77 Wilken Street
Telephone 978-740-2116
Owner Salem Public Schools
Person-in-Charge (PIC) Beth Kwapis
Inspector Jeffrey Baroz

Risk Category
HACCP Y / N
Permit #:
Food Safety Training / Exp. Date 1/20/2020

Type of Operation(s)
☒ Food Service
☐ Retail
☐ Residential Kitchen
☐ Mobile
☐ Temporary
☐ Caterer
☐ Bed & Breakfast
☐ Farmer's Market
☐ Other:

Type of Inspection
☒ Routine
☐ Reinspection
Previous Inspection Date:
☐ Pre-Operation
☐ Suspect Illness
☐ General Complaint
☐ HACCP
☐ Other:

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Circle designated compliance status (IN, OUT, N/A) for each numbered item
IN = in compliance OUT = not in compliance N/A = not observed N/A = not applicable

Mark "X" in appropriate box for COS and/or R
COS = corrected on-site during inspection R = repeat violation

Compliance Status	COS	R
Supervision		
1 <input checked="" type="radio"/> IN <input type="radio"/> OUT		
2 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A		
Employee Health		
3 <input checked="" type="radio"/> IN <input type="radio"/> OUT		
4 <input checked="" type="radio"/> IN <input type="radio"/> OUT		
5 <input checked="" type="radio"/> IN <input type="radio"/> OUT		
Good Hygienic Practices		
6 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A		
7 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A		
Preventing Contamination by Hands		
8 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A		
9 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A		
10 <input checked="" type="radio"/> IN <input type="radio"/> OUT		
Approved Source		
11 <input checked="" type="radio"/> IN <input type="radio"/> OUT		
12 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A		
13 <input checked="" type="radio"/> IN <input type="radio"/> OUT		
14 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A		
Protection from Contamination		
15 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A		
16 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A		

Compliance Status	COS	R
17 <input checked="" type="radio"/> IN <input type="radio"/> OUT		
Time / Temperature Control for Safety		
18 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A		
19 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A		
20 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A		
21 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A		
22 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A		
23 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A		
24 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A		
Consumer Advisory		
25 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A		
Requirements for Highly Susceptible Populations (HSP)		
26 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A		
Food / Color Additives and Toxic Substances		
27 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A		
28 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A		
Conformance with Approved Procedures		
29 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A		
Risk Factors are important practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public health interventions are control measures to prevent foodborne illness or injury.		

GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

Mark "X" in box if numbered item is not in compliance Mark "X" in appropriate box for COS and/or R COS = corrected on-site during inspection R = repeat violation

Compliance Status	COS	R
Safe Food and Water		
30		
31		
32		
Food Temperature Control		
33		
34		
35		
36		
Food Identification		
37 <input checked="" type="radio"/> X		
Prevention of Food Contamination		
38		
39		
40		
41		
42		

Compliance Status	COS	R
Proper Use of Utensils		
43		
44		
45		
46		
Utensils, Equipment and Vending		
47		
48		
49		
Physical Facilities		
50		
51		
52		
53		
54 <input checked="" type="radio"/> X		
55		
56		

57 SPECIAL REQUIREMENTS / OTHER ☐ Anti-choking (590.009(E)) ☐ Tobacco (590.009(F)) ☐ Allergen Awareness (590.009(G)) ☐ Local law regulation ☐ Other

Official Order for Correction: Based on an inspection today, the items checked indicate violations of the Board of Health Food Regulation / 2013 Federal Food Code. This report, when signed below by a Board of Health member or its agent constitutes an order of the Board of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If approved by this order, you have a right to a hearing. Your request must be in writing and submitted to the Board of Health at the above address within ten (10) calendar days of receipt of this order.

PIC's Signature: Jeffrey Baroz
Inspector's Signature: Jeffrey Baroz

Print: Lee Ann Gibner
Follow-up: YES ☒ NO ☐ (circle one)

Date: 5-23-19
Follow-up Date, if applicable: Next Routine

Page 2 of 2

Establishment Name:

Salem High School

Date: 5/23/2019

[illegible]

Violations cited in this report must be corrected within the time frames or as stated in Section 8-405.11 of the Food Code

Item Number	Code Section	P = Priority Item PF = Priority Foundation Item	Description of Violation
10	5-202.12	PF	<p><u>Basement Kitchen</u></p> <p>- Handwashing sinks in bathroom and handwashing sink adjacent to dishwashing room have peak hot water temperatures of 93.5°F and 84.5°F, respectively. Restore hot water to these sinks at a temperature at or above 100°F.</p>
37	3-302.11		<p>- Plastic bin labeled "rice" beneath prep table in middle of kitchen holds sugar. Either relabel bin with common name of the food item it holds, or remove sugar. (Corrected on site)</p>
54	Section 55		<p>- Dumpster found with its lids open. Keep lids closed when not in use.</p>

Corrective Action Required

☐ No

Do You

☐ Voluntary Compliance☐ Employee Restriction / Exclusion☐ Re-inspection Scheduled☐ **Emergency Suspension**☐ Embargo☐ **Emergency Closure**☐ Voluntary Disposal☐ Other

PIC's Signature:

Date: 5-23-19

Inspector's Signature

Date: 5/23/2019

Food Establishment Inspection Form

Page 1 of 4

The Commonwealth of Massachusetts
City of Salem Board of Health
120 Washington Street, Salem MA 01970
(978) 741-1800

Violations 8
Priority 0 Priority foundation 1 Core 7
Score (optional)

Date 9/12/2018
Time In 9:40am
Time Out 12:20pm

Establishment Name Suttons Hill School

Risk Category

Type of Operation(s)

Type of Inspection

Establishment Address 211 Lafayette Street

Telephone 978-740-1247

HACCP Y/N

Owner Salem Public Schools

Permit #

Person-in-Charge (PIC) Cameron Fullerton

Food Safety Training / Exp. Date 6/29/2021

Inspector Jeffrey Barony

☒ Food Service
☐ Retail
☐ Residential Kitchen
☐ Mobile
☐ Temporary
☐ Caterer
☐ Bed & Breakfast
☐ Farmer's Market
☐ Other:

☒ Routine
☐ Reinspection
Previous Inspection Date:
☐ Pre-Operation
☐ Suspect Illness
☒ General Complaint
☐ HACCP
☐ Other:

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance Status		COS	R	Compliance Status		COS	R
Supervision				Time / Temperature Control for Safety			
1	<input checked="" type="radio"/> IN <input type="radio"/> OUT	PIC present, demonstrates knowledge, and performs duties		17	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Proper disposition of returned, previously served, reconditioned & unsafe food	
2	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A	Certified Food Protection Manager		18	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	Proper cooking time & temperatures	
Employee Health				Requirements for Highly Susceptible Populations (HSP)			
3	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Management, food employee and conditional employee; knowledge, responsibilities and reporting		19	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	Proper reheating procedures for hot holding	
4	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Proper use of restriction and exclusion		20	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	Proper cooling time and temperature	
5	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Procedures for responding to vomiting and diarrheal events		21	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	Proper hot holding temperature	
Good Hygienic Practices				Food / Color Additives and Toxic Substances			
6	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/O	Proper eating, testing, drinking, or tobacco use		22	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	Proper cold holding temperature	
7	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/O	No discharge from eyes, nose, and mouth		23	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	Proper date marking and disposition	
Preventing Contamination by Hands				Consumer Advisory			
8	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/O	Hands clean & properly washed		24	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	Time as a Public Health Control	
9	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	No bare hand contact with RTE food		25	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A	Consumer advisory provided for raw / undercooked food	
10	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Adequate handwashing sinks properly supplied and accessible		Requirements for Highly Susceptible Populations (HSP)			
Approved Source				Food / Color Additives and Toxic Substances			
11	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Food obtained from approved source		26	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A	Pasteurized foods used; prohibited foods not offered	
12	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	Food received at proper temperature		Food / Color Additives and Toxic Substances			
13	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Food received in good condition, safe, & unadulterated		27	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A	Food additives: approved & properly used	
14	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	Required records available: shellstock tags, parasite destruction		28	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A	Toxic sub. properly identified, stored & used	
Protection from Contamination				Conformance with Approved Procedures			
15	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	Food separated and protected		29	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A	Compliance with variance / specialized process / HACCP Plan	
16	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A	Food-contact surfaces: cleaned & sanitized		Risk Factors are important practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public health interventions are control measures to prevent foodborne illness or injury.			

GOOD RETAIL PRACTICES

Compliance Status		COS	R	Compliance Status		COS	R
Safe Food and Water				Proper Use of Utensils			
30	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Pasteurized eggs used where required		43	<input checked="" type="radio"/> IN <input type="radio"/> OUT	In-use utensils properly stored	
31	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Water & ice from approved source		44	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Utensils, equipment & linens: properly stored, dried, & handled	
32	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Variance obtained for specialized processing methods		45	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Single-use / single-service articles: properly stored & used	
Food Temperature Control				Utensils, Equipment and Vending			
33	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Proper cooling methods used; adequate equipment for temperature control		46	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Gloves used properly	
34	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Plant food properly cooked for hot holding		47	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Food & non-food contact surfaces cleanable, properly designed, constructed & used	
35	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Approved thawing methods used		48	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Warewashing facilities: installed, maintained, & used; test strips	
36	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Thermometers provided & accurate		49	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Non-food contact surfaces clean	
Food Identification				Physical Facilities			
37	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Food properly labeled; original container		50	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Hot & cold water available; adequate pressure	
Prevention of Food Contamination				Physical Facilities			
38	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Insects, rodents, & animals not present		51	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Plumbing installed; proper backflow devices	
39	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Contamination prevented during food preparation, storage and display		52	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Sewage & waste water properly disposed	
40	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Personal cleanliness		53	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Toilet facilities: properly constructed, supplied, & cleaned	
41	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Wiping cloths: properly used & stored		54	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Garbage & refuse properly disposed; facilities maintained	
42	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Washing fruits & vegetables		55	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Physical facilities installed, maintained, & clean	
57	SPECIAL REQUIREMENTS / OTHER <input type="checkbox"/> Anti-choking (590.009(E)) <input type="checkbox"/> Tobacco (590.009(F)) <input type="checkbox"/> Allergen Awareness (590.009(G)) <input type="checkbox"/> Local law regulation <input type="checkbox"/> Other						

Official Order for Correction: Based on an inspection today, the items checked indicate violations of the Board of Health Food Regulation / 2013 Federal Food Code. This report, when signed below by a Board of Health member or its agent constitutes an order of the Board of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If reviewed by this order, you have a right to a hearing. Your request must be in writing and submitted to the Board of Health at the above address within ten (10) calendar days of receipt of this order.

PIC's Signature: Cameron Fullerton Print: Cameron Fullerton Date: 12 Sep 18
Inspector's Signature: Jeffrey Barony Follow-up: ☒ YES ☐ NO (circle one) Follow-up Date, if applicable: To be determined

Food Establishment Inspection Form

Page 2 of 4

The Commonwealth of Massachusetts
City of Salem Board of Health
120 Washington Street, Salem MA 01970
(978) 741-1800

Establishment Name:

Saltonstall School

Date: 9/12/2018

TEMPERATURE OBSERVATIONS

Item / Location	Temp (°F)	Item / Location	Temp (°F)	Item / Location	Temp (°F)

OBSERVATIONS AND/OR CORRECTIVE ACTIONS

Violations cited in this report must be corrected within the time frames or as stated in Section 8-405.11 of the Food Code

Item Number	Code Section	P = Priority Item PF = Priority Foundation Item	Description of Violation
			The Salem Board of Health responded to a complaint for which claimed undercooked hot patties were served to children, an air conditioning unit was malfunctioning, dishwashing machine was out of service, and a toilet in one of the kitchen staff's bathrooms was not working. Along with investigating the complaint, the inspector conducted a routine inspection. The following was noted:
			NOTE: Another claim made by the complainant was that brown water flowed from the kitchen sinks.
10	5-202.12	PF	- All handwashing sinks hot water peaks at 81°F. Restore hot water at all sinks to a temperature at or above 100°F.
			NOTE: No brown water observed at any of the handwashing and food prep sinks. PIC informed inspector kitchen staff observed brown water on 9/05/2018, the first day of classes, but have not seen any since that time.

Discussion with PIC:

Corrective Action Required

☐ No

☒ Yes

☐ Voluntary Compliance

☐ Employee Restriction / Exclusion

☐ Re-inspection Scheduled

☐ Emergency Suspension

☐ Embargo

☐ Emergency Closure

☐ Voluntary Disposal

☐ Other

PIC's Signature:

Carm Galbraith
Jeffrey Barony

Date: 12 Sept 18

Inspector's Signature:

Date: 9/12/2018

Food Establishment Inspection Form

Page 3 of 4

The Commonwealth of Massachusetts
City of Salem Board of Health
120 Washington Street, Salem MA 01970
(978) 741-1800

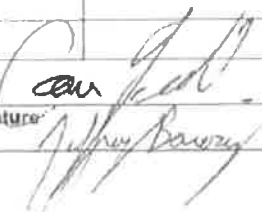
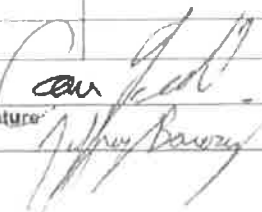
Establishment Name:

Salton Stall School

Date: 9/12/2018

OBSERVATIONS AND/OR CORRECTIVE ACTIONS

Violations cited in this report must be corrected within the time frames or as stated in Section 8-405.11 of the Food Code

Item Number	Code Section	P = Priority Item PF = Priority Foundation Item	Description of Violation
39 47	3-303.12 4-501.11		- Walk-in refrigerator's condenser is leaking water onto food. Have condenser repaired so it no longer leaks. (Store no food on shelves beneath leak and use a pan to catch water. Replace pans often as needed until leak is repaired. Food has been moved to other shelves at time of inspection.)
38	6-501.12		- Dead mouse found beneath shelf in dry storage room. Remove mouse and discard in sanitary manner.
55	6-501.11		- Evidence of water leakage found in dry storage room. Ceiling tiles and one wall have water stains and mold found on some ceiling tiles. Search for leak and repair. Replace ceiling tiles with mold.
47	4-501.11		- Dishwashing machine is out of service. Repair dishwashing machine and put back into service. (PIC informed inspector a new dishwashing machine is expected to be installed within 8 weeks from the date of this report. Three bay sink is used by kitchen staff in the meantime.)
53	5-203.12		- Women's bathroom's toilet is out of service. Repair toilet and put back into service. (A bathroom in the nearby teacher's lounge is used in the meantime.)
54	Section 5-5		- Dumpsters' lids found open. Keep dumpster lids closed when not in use.
			NOTE: PIC informed inspector that on 9/10/2018 two students were accidentally served beef patties that were cooked rare. The patties in question were discarded upon discovery.
PIC's Signature: 			Date: 9/12/18
Inspector's Signature: 			Date: 9/12/2018

Food Establishment Inspection Form				Page 1 of 2		
The Commonwealth of Massachusetts City of Salem Board of Health 120 Washington Street, Salem MA 01970 (978) 741-1800		# Violations		Date <u>May 22 2019</u>		
		Priority-	Priority foundation-	Core-	Time In <u>9:46 am</u>	
		Score (optional)			Time Out <u>11:10 am</u>	
Establishment Name <u>Sheldon Stail School</u>		Risk Category		Type of Operation(s)		
Establishment Address <u>211 Lafayette Street</u>		HACCP Plan		<input checked="" type="checkbox"/> Food Service <input type="checkbox"/> Retail <input type="checkbox"/> Residential Kitchen <input type="checkbox"/> Mobile <input type="checkbox"/> Temporary <input type="checkbox"/> Caterer <input type="checkbox"/> Bed & Breakfast <input type="checkbox"/> Farmer's Market <input type="checkbox"/> Other:		
Telephone <u>(978) 825-5532</u>		Permit #		Type of Inspection		
Owner <u>Salem Public Schools</u>		Food Safety Training / Exp. Date <u>4/24/2019</u>		<input checked="" type="checkbox"/> Routine <input type="checkbox"/> Reinspection Previous Inspection Date:		
Person-in-Charge (PIC) <u>Cameron Fullerton</u>				<input type="checkbox"/> Pre-Operation <input type="checkbox"/> Suspect Illness <input type="checkbox"/> General Complaint <input type="checkbox"/> HACCP <input type="checkbox"/> Other:		
Inspector <u>Janice Otero</u>						
FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS						
<small>Circle designated compliance status (IN, OUT, N/O, N/A) for each numbered item IN = In compliance OUT = not in compliance N/O = not observed N/A = not applicable</small>						
Compliance Status		COS	R	Compliance Status		
Supervision				Time / Temperature Control for Safety		
1	<input checked="" type="radio"/> IN <input type="radio"/> OUT			17	<input checked="" type="radio"/> IN <input type="radio"/> OUT	
PIC present, demonstrates knowledge, and performs duties				Proper disposition of returned, previously served, reconditioned & unsafe food		
2	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A			Employee Health		
Certified Food Protection Manager				18	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	
Employee Health				Proper cooking time & temperatures		
3	<input checked="" type="radio"/> IN <input type="radio"/> OUT			19	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	
Management, food employee and conditional employee; knowledge, responsibilities and reporting				Proper reheating procedures for hot holding		
4	<input checked="" type="radio"/> IN <input type="radio"/> OUT			20	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	
Proper use of restriction and exclusion				Proper cooling time and temperature		
5	<input checked="" type="radio"/> IN <input type="radio"/> OUT			21	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	
Procedures for responding to vomiting and diarrheal events				Proper hot holding temperature		
Good Hygienic Practices				22	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	
6	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/O			Proper cold holding temperature		
Proper eating, tasting, drinking, or tobacco use				23	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	
7	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/O			Proper date marking and disposition		
No discharge from eyes, nose, and mouth				24	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	
Preventing Contamination by Hands				Time as a Public Health Control		
8	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/O			Consumer Advisory		
Hands clean & properly washed				25	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A	
9	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O			Consumer advisory provided for raw / undercooked food		
No bare hand contact with RTE food				Requirements for Highly Susceptible Populations (HSP)		
10	<input checked="" type="radio"/> IN <input type="radio"/> OUT		X	26	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A	
Adequate handwashing sinks properly supplied and accessible				Pasteurized foods used; prohibited foods not offered		
Approved Source				Food / Color Additives and Toxic Substances		
11	<input checked="" type="radio"/> IN <input type="radio"/> OUT			27	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A	
Food obtained from approved source				Food additives: approved & properly used		
12	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O			28	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A	
Food received at proper temperature				Toxic sub. properly identified, stored & used		
13	<input checked="" type="radio"/> IN <input type="radio"/> OUT			Conformance with Approved Procedures		
Food received in good condition, safe, & unadulterated				29	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A	
14	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O			Compliance with variance / specialized process / HACCP Plan		
Required records available: shellstock tags, permit destruction				Risk Factors are important practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public health interventions are control measures to prevent foodborne illness or injury.		
Protection from Contamination						
15	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O					
Food separated and protected						
16	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A					
Food-contact surfaces; cleaned & sanitized						
GOOD RETAIL PRACTICES						
<small>Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods. Mark "X" in box if numbered item is not in compliance Mark "X" in appropriate box for COS and/or R COS = corrected on-site during inspection R = repeat violation</small>						
Compliance Status		COS	R	Compliance Status		
Safe Food and Water				Proper Use of Utensils		
30	<input checked="" type="radio"/> IN <input type="radio"/> OUT			43	<input checked="" type="radio"/> IN <input type="radio"/> OUT	
Pasteurized eggs used where required				In-use utensils properly stored		
31	<input checked="" type="radio"/> IN <input type="radio"/> OUT			44	<input checked="" type="radio"/> IN <input type="radio"/> OUT	
Water & ice from approved source				Utensils, equipment & linens: properly stored, dried, & handled		
32	<input checked="" type="radio"/> IN <input type="radio"/> OUT			45	<input checked="" type="radio"/> IN <input type="radio"/> OUT	
Variance obtained for specialized processing methods				Single-use / single-service articles: properly stored & used		
Food Temperature Control				46	<input checked="" type="radio"/> IN <input type="radio"/> OUT	
33	<input checked="" type="radio"/> IN <input type="radio"/> OUT			Gloves used properly		
Proper cooling methods used; adequate equipment for temperature control				Utensils, Equipment and Vending		
34	<input checked="" type="radio"/> IN <input type="radio"/> OUT			47	<input checked="" type="radio"/> IN <input type="radio"/> OUT	
Plant food properly cooked for hot holding				Food & non-food contact surfaces cleanable, properly designed, constructed & used		
35	<input checked="" type="radio"/> IN <input type="radio"/> OUT			48	<input checked="" type="radio"/> IN <input type="radio"/> OUT	
Approved thawing methods used				Warewashing facilities: installed, maintained, & used; test strips		
36	<input checked="" type="radio"/> IN <input type="radio"/> OUT			49	<input checked="" type="radio"/> IN <input type="radio"/> OUT	
Thermometers provided & accurate				Non-food contact surfaces clean		
Food Identification				Physical Facilities		
37	<input checked="" type="radio"/> IN <input type="radio"/> OUT			50	<input checked="" type="radio"/> IN <input type="radio"/> OUT	
Food properly labeled; original container				Hot & cold water available; adequate pressure		
Prevention of Food Contamination				51	<input checked="" type="radio"/> IN <input type="radio"/> OUT	
38	<input checked="" type="radio"/> IN <input type="radio"/> OUT			Plumbing installed; proper backflow devices		
Insects, rodents, & animals not present				52	<input checked="" type="radio"/> IN <input type="radio"/> OUT	
39	<input checked="" type="radio"/> IN <input type="radio"/> OUT		X	Sewage & waste water properly disposed		
Contamination prevented during food preparation, storage and display				53	<input checked="" type="radio"/> IN <input type="radio"/> OUT	
40	<input checked="" type="radio"/> IN <input type="radio"/> OUT			Toilet features: properly constructed, supplied, & cleaned		
Personal cleanliness				54	<input checked="" type="radio"/> IN <input type="radio"/> OUT	
41	<input checked="" type="radio"/> IN <input type="radio"/> OUT			Garbage & refuse properly disposed; facilities maintained		
Wiping cloths: properly used & stored				55	<input checked="" type="radio"/> IN <input type="radio"/> OUT	
42	<input checked="" type="radio"/> IN <input type="radio"/> OUT			Physical facilities installed, maintained, & clean		
Washing fruits & vegetables				56	<input checked="" type="radio"/> IN <input type="radio"/> OUT	
				Adequate ventilation & lighting; designated areas used		
SPECIAL REQUIREMENTS / OTHER <input type="checkbox"/> Anti-choking (590.009(E)) <input type="checkbox"/> Tobacco (590.009(F)) <input type="checkbox"/> Allergen Awareness (590.009(G)) <input type="checkbox"/> Local law regulation <input type="checkbox"/> Other						
Official Order for Correction: Based on an inspection today, the items checked indicate violations of the Board of Health Food Regulation / 2013 Federal Food Code. This report, when signed below by a Board of Health member or its agent constitutes an order of the Board of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If agreed to by this order, you have a right to a hearing. Your request must be in writing and submitted to the Board of Health at the above address within (10) calendar days of receipt of this order.						
PIC's Signature: <u>Cameron Fullerton</u>		Print: <u>Cameron Fullerton</u>		Date: <u>22 May 19</u>		
Inspector's Signature: <u>Janice Otero</u>		Follow-up: YES (NO) (circle one)		Follow-up Date, if applicable:		

Food Establishment Inspection Form

Page 2 of 2

The Commonwealth of Massachusetts
City of Salem Board of Health
120 Washington Street, Salem MA 01970
(978) 741-1800

Establishment Name:

Sutton Street School

Date: May 22 2019

TEMPERATURE OBSERVATIONS

Item / Location	Temp (°F)	Item / Location	Temp (°F)	Item / Location	Temp (°F)

OBSERVATIONS AND/OR CORRECTIVE ACTIONS

Violations cited in this report must be corrected within the time frames or as stated in Section 8-405.11 of the Food Code

Item Number	Code Section	P = Priority Item PF = Priority Foundation Item	Description of Violation
10	5-202.12	PF	All Handwashing Sinks had hot water that only reach about 70°F. Need to adjust hot water so that the hot water reaches 100°F or higher.
10	5-203.12	PF	Both Male + Female bathrooms for the staff had hot water in the sinks that only reached 58°F. adjust hot water so that the temperature is at or above 100°F.
39	3-303.12		Wax in freezer has ice build up and ice on the floor. Repair so that food does not come in contact with ice/water and freezer is in good working conditions.
54	Section 5-5		Dumpster lids are currently open. Dumpster lids must be closed at all times if not being in used.

Discussion with PIC:

Corrective Action Required

☐ No

☐ Yes

☐ Voluntary Compliance

☐ Employee Restriction / Exclusion

☐ Re-Inspection Scheduled

☐ Emergency Suspension

☐ Embargo

☐ Emergency Closure

☐ Voluntary Disposal

☐ Other

PIC's Signature:

[Signature]

Date: 22 May 19

Inspector's Signature

[Signature]

Date: 5/22/19

Food Establishment Inspection Form

Page 1 of 2

The Commonwealth of Massachusetts
City of Salem Board of Health
120 Washington Street, Salem MA 01970
(978) 741-1800

Violations 2
Priority- 0 Priority foundation- 0 Core- 2
Score (optional)

Date 10/24/2018
Time In 9:40am
Time Out 10:30am

Establishment Name Witchcraft Heights Elementary School
Establishment Address 1 Frederick Street
Telephone 978-825-3309
Owner Salem Public Schools
Person-In-Charge (PIC) Jeannette BeBois
Inspector Jeffrey Barossy

Risk Category
Type of Operation(s)
☒ Food Service
☐ Retail
☐ Residential Kitchen
☐ Mobile
☐ Temporary
☐ Caterer
☐ Bed & Breakfast
☐ Farmer's Market
☐ Other:

Type of Inspection
☒ Routine
☐ Reinspection
Previous Inspection Date:
☐ Pre-Operation
☐ Suspect Illness
☐ General Complaint
☐ HACCP
☐ Other:

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance Status		COS	R
Supervision			
1	<input checked="" type="radio"/> IN <input type="radio"/> OUT	PIC present, demonstrates knowledge, and performs duties	
2	<input checked="" type="radio"/> IN <input type="radio"/> OUT N/A	Certified Food Protection Manager	
Employee Health			
3	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Management, food employee and conditional employee, knowledge, responsibilities and reporting	
4	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Proper use of restriction and exclusion	
5	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Procedures for responding to vomiting and diarrheal events	
Good Hygienic Practices			
6	<input checked="" type="radio"/> IN <input type="radio"/> OUT N/A	Proper eating, tasting, drinking, or tobacco use	
7	<input checked="" type="radio"/> IN <input type="radio"/> OUT	No discharge from eyes, nose, and mouth	
Preventing Contamination by Hands			
8	<input checked="" type="radio"/> IN <input type="radio"/> OUT N/A	Hands clean & properly washed	
9	<input checked="" type="radio"/> IN <input type="radio"/> OUT N/A	No bare hand contact with RTE food	
10	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Adequate handwashing sinks properly supplied and accessible	
Approved Source			
11	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Food obtained from approved source	
12	<input checked="" type="radio"/> IN <input type="radio"/> OUT N/A	Food received at proper temperature	
13	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Food received in good condition, safe, & undamaged	
14	<input checked="" type="radio"/> IN <input type="radio"/> OUT N/A	Required records available: shellstock tags, parasite destruction	
Protection from Contamination			
15	<input checked="" type="radio"/> IN <input type="radio"/> OUT N/A	Food separated and protected	
16	<input checked="" type="radio"/> IN <input type="radio"/> OUT N/A	Food-contact surfaces; cleaned & sanitized	

Compliance Status		COS	R
17	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Proper disposition of returned, previously served, reconditioned & unsafe food	
Time / Temperature Control for Safety			
18	<input checked="" type="radio"/> IN <input type="radio"/> OUT N/A	Proper cooking time & temperatures	
19	<input checked="" type="radio"/> IN <input type="radio"/> OUT N/A	Proper reheating procedures for hot holding	
20	<input checked="" type="radio"/> IN <input type="radio"/> OUT N/A	Proper cooling time and temperature	
21	<input checked="" type="radio"/> IN <input type="radio"/> OUT N/A	Proper hot holding temperature	
22	<input checked="" type="radio"/> IN <input type="radio"/> OUT N/A	Proper cold holding temperature	
23	<input checked="" type="radio"/> IN <input type="radio"/> OUT N/A	Proper date marking and disposition	
24	<input checked="" type="radio"/> IN <input type="radio"/> OUT N/A	Time as a Public Health Control	
Consumer Advisory			
25	<input checked="" type="radio"/> IN <input type="radio"/> OUT N/A	Consumer advisory provided for raw / undercooked food	
Requirements for Highly Susceptible Populations (HSP)			
26	<input checked="" type="radio"/> IN <input type="radio"/> OUT N/A	Pasteurized foods used; prohibited foods not offered	
Food / Color Additives and Toxic Substances			
27	<input checked="" type="radio"/> IN <input type="radio"/> OUT N/A	Food additives: approved & properly used	
28	<input checked="" type="radio"/> IN <input type="radio"/> OUT N/A	Toxic sub. properly identified, stored & used	
Conformance with Approved Procedures			
29	<input checked="" type="radio"/> IN <input type="radio"/> OUT N/A	Compliance with variance / specialized process / HACCP Plan	

Risk Factors are important practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public health interventions are control measures to prevent foodborne illness or injury.

GOOD RETAIL PRACTICES

Compliance Status		COS	R
Safe Food and Water			
30	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Pasteurized eggs used where required	
31	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Water & ice from approved source	
32	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Variance obtained for specialized processing methods	
Food Temperature Control			
33	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Proper cooling methods used; adequate equipment for temperature control	
34	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Plant food properly cooked for hot holding	
35	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Approved thawing methods used	
36	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Thermometers provided & accurate	
Food Identification			
37	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Food properly labeled; original container	
Prevention of Food Contamination			
38	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Insects, rodents, & animals not present	
39	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Contamination prevented during food preparation, storage and display	
40	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Personal cleanliness	
41	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Wiping cloths: properly used & stored	
42	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Washing fruits & vegetables	

Compliance Status		COS	R
Proper Use of Utensils			
43	<input checked="" type="radio"/> IN <input type="radio"/> OUT	In-use utensils properly stored	
44	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Utensils, equipment & linens: properly stored, dried, & handled	
45	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Single-use / single-service articles: properly stored & used	
46	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Gloves used properly	
Utensils, Equipment and Vending			
47	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Food & non-food contact surfaces cleanable, properly designed, constructed & used	
48	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Handwashing facilities: installed, maintained, & used; test strips	
49	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Non-food contact surfaces clean	
Physical Facilities			
50	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Hot & cold water available; adequate pressure	
51	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Plumbing installed; proper backflow devices	
52	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Sewage & waste water properly disposed	
53	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Toilet fixtures: properly constructed, supplied, & cleaned	
54	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Garbage & refuse properly disposed; facilities maintained	
55	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Physical facilities installed, maintained, & clean	
56	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Adequate ventilation & lighting; designated areas used	

57 SPECIAL REQUIREMENTS / OTHER ☐ Anti-choking (590.008(F)) ☐ Tobacco (590.009(F)) ☐ Allergen Awareness (590.009(G)) ☐ Local law regulation ☐ Other

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PIC's Signature: Jeannette BeBois Print: Jeannette BeBois Date: 10-24-18
Inspector's Signature: Jeffrey Barossy Follow-up: YES ☒ NO ☐ (circle one) Follow-up Date, if applicable: Next Routine

Food Establishment Inspection Form

Page 1 of 2

The Commonwealth of Massachusetts
City of Salem Board of Health
120 Washington Street, Salem MA 01970
(978) 741-1800

Violations
Priority-0 Priority foundation-0 Core-2
Score (optional)

Date 5/22/2019
Time In 9:45am
Time Out 10:50am

Establishment Name Witchcraft Heights Elementary School

Risk Category

Type of Operation(s)

Type of Inspection

Establishment Address 1 Frederick Street

Telephone 978-825-3309

HACCP Y/N

Owner Salem Public Schools

Permit #:

Person-In-Charge (PIC) Jeannette DeBois

Food Safety Training / Exp. Date 4/29/2021

Inspector Jeffrey Barony

☒ Food Service
☐ Retail
☐ Residential Kitchen
☐ Mobile
☐ Temporary
☐ Caterer
☐ Bed & Breakfast
☐ Farmer's Market
☐ Other:

☒ Routine
☐ Reinspection
Previous Inspection Date:
☐ Pre-Operation
☐ Suspect Illness
☐ General Complaint
☐ HACCP
☐ Other:

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Circle designated compliance status (IN, OUT, N/O, N/A) for each numbered item
IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Mark "X" in appropriate box for COS and/or R
COS = corrected on-site during inspection R = repeat violation

Compliance Status COS R

Compliance Status COS R

Supervision

1 ☒ IN ☐ OUT PIC present, demonstrates knowledge, and performs duties
2 ☒ IN ☐ OUT ☐ N/A Certified Food Protection Manager

Employee Health

3 ☒ IN ☐ OUT Management, food employee and conditional employee; knowledge, responsibilities and reporting
4 ☒ IN ☐ OUT Proper use of restriction and exclusion
5 ☒ IN ☐ OUT Procedures for responding to vomiting and diarrheal events

Good Hygienic Practices

6 ☒ IN ☐ OUT ☐ N/O Proper eating, tasting, drinking, or tobacco use
7 ☒ IN ☐ OUT ☐ N/O No discharge from eyes, nose, and mouth

Preventing Contamination by Hands

8 ☒ IN ☐ OUT ☐ N/O Hands clean & properly washed
9 ☒ IN ☐ OUT ☐ N/A ☐ N/O No bare hand contact with RTE food
10 ☒ IN ☐ OUT Adequate handwashing sinks properly supplied and accessible

Approved Source

11 ☒ IN ☐ OUT Food obtained from approved source
12 ☒ IN ☐ OUT ☐ N/A ☐ N/O Food received at proper temperature
13 ☒ IN ☐ OUT Food received in good condition, safe, & unadulterated
14 ☒ IN ☐ OUT ☐ N/A ☐ N/O Required records available; shellstock tags, parasite destruction

Protection from Contamination

15 ☒ IN ☐ OUT ☐ N/A ☐ N/O Food separated and protected
16 ☒ IN ☐ OUT ☐ N/A Food-contact surfaces; cleaned & sanitized

17 ☒ IN ☐ OUT Proper disposition of returned, previously served, reconditioned & unsafe food

Time / Temperature Control for Safety

18 ☒ IN ☐ OUT ☐ N/A ☐ N/O Proper cooking time & temperatures
19 ☒ IN ☐ OUT ☐ N/A ☐ N/O Proper reheating procedures for hot holding
20 ☒ IN ☐ OUT ☐ N/A ☐ N/O Proper cooling time and temperature
21 ☒ IN ☐ OUT ☐ N/A ☐ N/O Proper hot holding temperature
22 ☒ IN ☐ OUT ☐ N/A ☐ N/O Proper cold holding temperature
23 ☒ IN ☐ OUT ☐ N/A ☐ N/O Proper date marking and disposition
24 ☒ IN ☐ OUT ☐ N/A ☐ N/O Time as a Public Health Control

Consumer Advisory

25 ☒ IN ☐ OUT ☐ N/A Consumer advisory provided for raw / undercooked food

Requirements for Highly Susceptible Populations (HSP)

26 ☒ IN ☐ OUT ☐ N/A Pasteurized foods used; prohibited foods not offered

Food / Color Additives and Toxic Substances

27 ☒ IN ☐ OUT ☐ N/A Food additives: approved & properly used
28 ☒ IN ☐ OUT ☐ N/A Toxic sub. properly identified, stored & used

Conformance with Approved Procedures

29 ☒ IN ☐ OUT ☐ N/A Compliance with variance / specialized process / HACCP Plan

Risk factors are important practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public health interventions are control measures to prevent foodborne illness or injury.

GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

Mark "X" in box if numbered item is not in compliance

Mark "X" in appropriate box for COS and/or R

COS = corrected on-site during inspection

R = repeat violation

Compliance Status COS R

Compliance Status COS R

Safe Food and Water

30 ☒ IN ☐ OUT Pasteurized eggs used where required
31 ☒ IN ☐ OUT Water & ice from approved source
32 ☒ IN ☐ OUT Variance obtained for specialized processing methods

Food Temperature Control

33 ☒ IN ☐ OUT Proper cooling methods used; adequate equipment for temperature control
34 ☒ IN ☐ OUT Plant food properly cooked for hot holding
35 ☒ IN ☐ OUT Approved thawing methods used
36 ☒ IN ☐ OUT Thermometers provided & accurate

Food Identification

37 ☒ IN ☐ OUT Food properly labeled; original container

Prevention of Food Contamination

38 ☒ IN ☐ OUT Insects, rodents, & animals not present
39 ☒ IN ☐ OUT Contamination prevented during food preparation, storage and display
40 ☒ IN ☐ OUT Personal cleanliness
41 ☒ IN ☐ OUT Wiping cloths: properly used & stored
42 ☒ IN ☐ OUT Washing fruits & vegetables

Proper Use of Utensils

43 ☒ IN ☐ OUT In-use utensils properly stored
44 ☒ IN ☐ OUT Utensils, equipment & linens: properly stored, dried, & handled
45 ☒ IN ☐ OUT Single-use / single-service articles: properly stored & used
46 ☒ IN ☐ OUT Gloves used properly

Utensils, Equipment and Vending

47 ☒ IN ☐ OUT Food & non-food contact surfaces cleanable, properly designed, constructed & used
48 ☒ IN ☐ OUT Warewashing facilities: installed, maintained, & used; test strips
49 ☒ IN ☐ OUT Non-food contact surfaces clean

Physical Facilities

50 ☒ IN ☐ OUT Hot & cold water available; adequate pressure
51 ☒ IN ☐ OUT Plumbing installed; proper backflow devices
52 ☒ IN ☐ OUT Sewage & waste water properly disposed
53 ☒ IN ☐ OUT Toilet facilities: properly constructed, supplied, & cleaned
54 ☒ IN ☐ OUT Garbage & refuse properly disposed; facilities maintained
55 ☒ IN ☐ OUT Physical facilities installed, maintained, & clean
56 ☒ IN ☐ OUT Adequate ventilation & lighting; designated areas used

57 SPECIAL REQUIREMENTS / OTHER ☐ Anti-choking (590.009(E)) ☐ Tobacco (590.009(F)) ☐ Allergen Awareness (590.009(G)) ☐ Local law regulation ☐ Other

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PIC's Signature: Jeannette DeBois
Inspector's Signature: Jeffrey Barony

Print: Seanna + 12 DU 30 15 Date: 5-22-2019
Follow-up: YES ☒ NO ☐ (circle one) Follow-up Date, if applicable: Next Routine

